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An exploratory case study of three scales of food pantries in Story County, Iowa

by

Jacqueline Ann Nester

A thesis submitted to the graduate faculty

in partial fulfillment of the requirements for the degrees of

MASTER OF SCIENCE

MASTER OF COMMUNITY AND REGIONAL PLANNING

Co-Majors: Sustainable Agriculture; Community and Regional Planning

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ABSTRACT

Story County, Iowa, has the highest rate of food insecurity (15.2%) in the state (12.7%). As a result of this large need, the county has responded by creating 16 private food pantries and one soup kitchen. Many people, however, require both public (e.g. SNAP, WIC, TEFAP, and School Lunch/Breakfast Program) and private assistance, indicating the depth of food insecurity is great. As a result of this growing demand for private emergency food to supplement public food assistance programming, questions emerge about the effectiveness of this approach. Thus, an exploratory case study looking at three scales of food pantries in the county was employed to understand the experiences of food pantry customers also utilizing public assistance, along with the perceptions of food pantry customers' by the pantry volunteers. Customer surveys and in-depth interviews, combined with a focus group with food pantry volunteers, show a clear dichotomy between the volunteers and customers as to how food pantries should be used. These differences are important to highlight and change as private assistance becomes a more prominent response to food insecurity in the United States.

CHAPTER 1. INTRODUCTION

This research seeks to understand food insecurity in Story County, Iowa, using an exploratory case study approach. Story County was chosen because it has the highest food insecurity in the state. The focus of this research includes individuals that are receiving public and private food assistance by way of food pantries, along with the respective volunteers, from three scales of food pantries. This case study highlights misconceptions held by food pantry volunteers about their customers. These misconceptions are important to address given that the volunteers engaged held leadership roles, and therefore, had the power to influence organizational changes that impact assistance to customers.

Across the United States, food insecurity rates have skyrocketed in the last 15 years. From 2000 to 2015, nearly 30 million additional individuals enrolled in the nation's largest nutrition assistance program, Supplemental Nutrition Assistance Program (SNAP). Over the same period, SNAP itself experienced significant changes, among them the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA) and the Great Recession in 2007. Though these two events have been studied for their impact on SNAP, much less is about their effect on the private organizations that are filling the gaps that changes to SNAP have created in the public safety net.

Some of the common federal food assistance programs include the Supplemental Nutrition Assistance Program (SNAP), Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), School Breakfast Program, The Emergency Food Assistance Program (TEFAP), and the National School Lunch Program (Nutrition.gov, 2015). Since the inception of these governmental food programs, the nation has gone through several political and economic transformations, which have forced individuals relying on assistance programs to

adapt to the changes. Given the expenses of nutrition programming, which reached about \$80 billion in 2014, there is concern that increased enrollment will inevitably lead to cuts due to political and social pressure to reduce the federal deficit (King, 2000).

Increasingly, government has relied on the private sector to fill the gap in people's food needs. In addition, it is clear that public food assistance benefit levels are not meeting most household's monthly food needs. Feeding America, the nation's largest anti-hunger relief agency, reports that 58% of SNAP recipients are also frequent (every month) or recurrent (at least 6 months out of the year) users of Feeding America's food banks (Feeding America, 2014). Additionally, researchers have concluded that private food assistance is not a substitute for public assistance, but rather both are used together (Paynter, Berner, & Anderson, 2011). Given that most food pantry customers are also receiving public food assistance, more research is needed to understand the livelihoods of those seeking both forms of assistance.

Research Focus

Much of the current research has focused on federal food assistance programming and outcomes, while little has been done to understand the private emergency food system from the perspective of the customers and volunteers. Specifically, there is a lack of longitudinal data for the private emergency food system, as well as a lack of information regarding the relationship between emergency food assistance customers and SNAP usage (Mosley & Tiehen, 2004). Given the lack of research on the private food system, this project is an important effort to begin filling that gap.

Further, most of the research that has focused on the private emergency food system looks primarily at organizations in urban areas. In contrast, the lived experiences of those in rural

areas experiencing food insecurity has not been deeply explored. Though there may be similar lived experiences between urban and rural residents in poverty and or food insecurity, there are also significant differences related to demographics (typically older and homogenous communities), mobility, and access to necessary resources that may affect food insecurity in communities (Paynter et al., 2011).

Research Setting

The setting of this research was Story County, Iowa (population 92,406) because it has the highest percentage of food insecure residents (15.2%) in the state, which has an average food insecurity rate of 12.7% (ISU Extension, 2014). Story County, like many counties, is working to alleviate some of the symptoms of inequality and poverty by providing items like emergency food through food banks, food pantries, and soup kitchens. Throughout the county there are sixteen pantries and one soup kitchen. For this research, I wanted to look at food pantries since these organizations are the most extensive emergency food distribution points in Story County and come in most direct contact with food insecure individuals. Therefore food pantries served as organizations through which I could access individual customers, as well as individual food pantry volunteers. The unit of analysis for this case study is at the individual level.

Much of the prior case study research on food pantries has focused on the usage or non-usage of SNAP—previously known as food stamps—in urban areas (e.g. Algert, Reibel & Renvall, 2006). Little has been done to focus on the need of food pantry users visiting rural and urban pantries who are also accessing public food assistance. Additionally, as political pressure threatens to cut governmental nutrition programs like SNAP, this type of research is needed to understand what is happening at the customer level during economic and political change.

Research Approach and Questions

An exploratory case study was used to answer research questions related to the lived experiences of customers and volunteers at three emergency food pantries in Story County, Iowa. Through convergent parallel design, three components— customer surveys and interviews, along with a focus group with volunteers—were collected simultaneously. Additionally, a member check was conducted to bring together anti-hunger groups throughout the county to hear the preliminary results of this study to ensure credibility.

For three months in the summer of 2015, I approached several food pantry customers at the three different pantries in Story County to invite them to take a survey that emulated a successful survey conducted in Milwaukee, WI, by the Hunger Center. This survey served as baseline data for several pantry customers (n=64) and was also used as a filter to choose interviewees who were also enrolled in federal food assistance programming. Food pantry volunteers were also invited to the study by way of a focus group in order to understand their experiences at their pantry. What resulted was the understanding of how the lived experiences of customers differ from or compare to those of the volunteers' perceptions. Thus, the process concurrently used in-depth interviews and a focus group to build upon the original surveys by using similar but more in-depth questions.

The research questions for this study included:

1. What portion of food pantry customers are recurrent (visiting six or more times) visitors, and what portion are also seeking public assistance?
2. What are the lived experiences of individuals receiving food assistance from food pantries in Story County, Iowa, specifically in meeting their basic needs?
 - a. How do customers seeking private and public food assistance rationalize their situation?
 - b. What personal life changes have occurred to customers requiring public and private food assistance?

3. Do the perceptions of food pantry volunteers match their customer's lived experiences of being food insecure?
 - a. How do volunteers perceive customers seeking more than one type of food assistance (i.e. more than one pantry, also on public benefits, etc.)?
 - b. Do the rural (small and medium) and urban (large) pantries perceptions of their customers differ?

Assumptions

Several assumptions were made during this research process. One of the most prominent assumptions is my belief that the United States government should prioritize—and ultimately be responsible for—issues related to food insecurity. The implications of not addressing food insecurity at the individual and household level include but are not limited to physical (influence of hunger on one's ability to work or learn) and related psychosocial affects (influence of stress on health as a result of being food insecure) (Hamelin, Haicht, & Beaudry, 1999). Many would argue these implications create a moral obligation for the U.S. government to help prevent food insecurity.

A second assumption is that by sharing information about food pantry customers to their respective food pantries, the volunteers will have the power to create change. This can either be in the organizational structure, such as hours of operation or restrictions on visits per month, or by shifting individual understanding of their customers by reporting back the findings from this research.

A third assumption is that public federal food assistance will continue to be at risk for cutbacks based on political and economic change, and that emergency food providers will be left to try to fill the gap. Additionally, I believe the term “emergency” food providers perpetuates the idea that the problem of food insecurity is temporary, and that it should be altered to better represent the true role of these organizations in supporting a food safety net. My bias aligns with

that of scholars such as Karen Curtis, who believes that the conventional private emergency food system perpetuates the idea that poverty is the result of personal defects and temporary misfortunes by providing symptomatic relief rather than offering a more systemic approach (1997). However, emergency food providers, such as pantries, are currently embedded in the food safety net and thus are in a unique position to improve the emergency food landscape by shifting towards a longer term local response to food insecurity by learning from the food justice movement.

My fourth and final assumption is that healthy food should be a right rather than a privilege. I believe that denying someone appropriate food is equivalent to denying their human rights.

Researcher Perspective

My time at Iowa State has altered my belief system drastically, especially in considering food as a human right. As part of my involvement with ISU's Sustainable Agriculture Student Association, I began to regularly volunteer for a local market and meal program in Ames, Iowa, called Food at First (FAF) in 2013 as a form of praxis through service. FAF has challenged my own assumptions about the work of volunteering in the emergency food system versus working outside of "the system." I find these critical reflections crucial to the future work of eliminating food insecurity. Additionally, I was lucky enough to spend two summers at the FAF garden, which has also instilled in me an optimism about human action and a deep moral responsibility to promote healthy, natural food for our planet and people.

Nearly every day here in Ames, a town of 60,000, I see a customer of FAF and wave hello and often times have really meaningful conversations. Besides living across the street from the organization, I am reminded daily that the work of food pantries can build community and

foster social justice, not just provide emergency food. At the same time, I am cognizant of my privilege in this research, as a middle class woman who has not had to go through receiving food assistance. It is from my experience with my colleagues, my own reflections, as well as my interactions with FAF customers that I have been motivated to work in the field of poverty and food insecurity.

Do note, I decided against studying FAF since I did not want to negatively impact the valued relationships that I have built and maintained for over two years.

CHAPTER 2. LITERATURE REVIEW

This case study seeks to understand the lived experiences of customers relying on public and private sources of food assistance. The purpose is to understand how the public and private emergency food systems interact, and how people living in the gaps of our food safety net survive on a day-to-day basis. Some of the relevant themes in the literature surrounding public and private food assistance includes how food insecurity is measured, defined, and some of the causes; eligibility and enrollment of public assistance; background to private assistance; and the history of the private emergency food system in relation to two important historical events: PRWORA and the Great Recession. To conclude the review in preparation for what this research addresses, there will be a summation of the literature surrounding the lived experience of those that are food insecure as well as guiding theory for understanding the social context of these issues.

Defining and Measuring Food Insecurity

The term “food insecurity” was first identified in 1974 at a World Food Conference at the United Nations (Pinstrip-Andersen, 2009). A definition by the United States Department of Agriculture (USDA) states that food insecurity is the “limited or uncertain availability of nutritionally adequate and safe foods or limited or uncertain ability to acquire acceptable foods in socially acceptable ways” (USDA-ERS, 2014). Though food insecurity is a relatively new term, the awareness and action of the United States government to address the food insecure first began during the Great Depression (1934) when many people did not have the means of obtaining adequate food (Daponte & Bade, 2006).

The U.S. began comprehensive measurements of food insecurity in 1995 when the Census Bureau added food security survey questions to the Current Population Survey (CPS) (Bickel et al., 2000). The CPS measures food insecurity on a scale ranging from 0-10 in severity, with very low food security and hunger as the most severe (Bickel et al., 2000). In 2013, 14.3% of Americans were food insecure and 5.6% experienced very low food security, though this number does not include people living in group quarters like assisted living or nursing home facilities (Coleman-Jensen, Gregory, & Singh, 2014; Feeding America, 2014). While hunger is used in common discourse, it is important to note the difference between food insecurity and hunger; while food insecurity means a person does not know where their next meal is coming from, hunger is the painful sensation stemming from a lack of food (Bickel et al., 2000).

The term “food insecurity” was originally met with scrutiny because it was seen as a way to pacify the intensity of the problem as compared to using the word “hunger” (Allen, 2007). Though the redefinition was critiqued as an action that hindered the progress of anti-hunger leaders, it was shown to be a result of “hunger” eliciting too many different definitions when used in practice; thus “hunger” has been replaced by “very low food security” in today’s Current Population Census (Allen, 2007). There is importance to using one term to define what is meant by food insecurity in order to have a clear understanding of the problem and improved policy and programming (Hendriks, 2015).

Causes of Food Insecurity

A combination of factors contribute to the root causes of food insecurity. Much of the research focusing on the causes of food insecurity has been more quantitative by collecting household level data and contextual variables in order to understand “risk factors” to becoming food insecure (Curtis, 1997; RTI International, 2014). Risk factors can be collected by using the

data from applications for the nation's prominent food assistance program—the Supplemental Nutrition Assistance Program (SNAP)—which records demographics, income and employment, living arrangements, and any assets (Office, 2015). Prominent risk factors for becoming food insecure include low educational attainment, number of dependents in the household, and female-headed households (Gundersen & Oliveira, 2001). Other characteristics prevalent among those that are food insecure include having a household member with a disability, whether medical, mental, or occupational; in 2014, only 17.1% of people with disabilities were employed compared to the 64.6% of people without disabilities that are employed (US Bureau of Labor Statistics, 2015). In relation to the total number of medical disabilities, it is important to note that each year between 2.8 and 3.3 million people file for medical bankruptcy, contributing to the number of people in poverty (Sugden, 2012).

From a broader perspective, Curtis argues that the cause of food insecurity stems from social inequality in jobs and income (1997). Some researchers connect the causes of food insecurity to the concentration of low-wage employment, lack of full-time job opportunities, shifting job market opportunities towards a growing service sector, and the loss of unionized labor (Orloff, 2005; Quadagno, 1999). Quadagno focuses on the history of job opportunities as a cause of economic hardship and related food insecurity, noting that from 1930 until 1990 the employment in the service sector grew from 59% to 77%, and union membership from 1988-1996 had decreased from 56% to 37% (1999). In 2013, occupations in the service sector made up about two thirds of all workers in the U.S. making the minimum wage or less (U.S. Bureau of Labor Statistics, 2013). Curtis and McClellan argue that the emergence of a service sector increased the income gap, and therefore increased the number of people in poverty (1995).

The larger context of the growing income gap is arguably due to the growth in neoliberal (market-oriented) state policies (Coburn, 2000). Larner argues that the rise of neoliberalism in politics has influenced privatization of welfare and the reduction of U.S. government involvement in social welfare policies (2000). Thus, neoliberal politics have prioritized economic competitiveness over issues of poverty and income inequality (Larner, 2000).

Scholars agree that food insecurity is caused by the lack of attention towards alleviating poverty in the U.S. (Winne, 2005; Poppendieck, 1999). Some argue that household food insecurity is just one manifestation of poverty, therefore arguing that public attention towards providing short-term food to the hungry is a piecemeal approach to addressing a larger social issue (Morgen, 2001; Winne, 2005).

However, others note that poverty alone is not a determinant of food insecurity. Research has shown that 65% of households close to poverty are food secure, while households with greater income have been shown to experience food insecurity (Gundersen, Kreider, & Pepper, 2011). This counterintuitive relationship may be due to the measurement of food insecurity by way of the CPS, which only measures current income rather than income over multiple years (Gundersen et al., 2011). Alternative measures of poverty could also be helpful in delineating poverty and food insecurity. Instead of focusing solely on the conventional approach: one's ability to consume, poverty can be measured by also looking at the relational/symbolic aspects of the lived experiences of poverty—powerlessness, lack of voice, disrespect, humiliation, shame and stigma, othering, denial of human rights, and more (Lister, 2002).

It is also important to note that food insecurity does not affect all people equally. Groups that have a greater risk of becoming food insecure include children, the elderly, minorities and low-income households (RTI International, 2014). Macro-level inequality in the U.S. is

illustrated in the reports on food insecure households, which show that in 2013 African American (25%), American Indian (40%), and Hispanic households (23%) experienced higher levels of food insecurity as compared to white, non-Hispanic (10.6%) households (RTI International, 2014).

Food Insecurity along Class, Gender, and Racial Lines

In the U.S. and around the world, poverty has disproportionately affected a greater number of people of color, minorities, migrants, women, LGBT communities, and children. Each of these categories of oppressed people have disproportionately experienced food insecurity and hunger. In relation to gender, women are 40% more likely to experience poverty as compared to men, and out of all of the adults living in extreme poverty throughout the world, 60% are female (Smith, 2008). In addition to gender, racial disparities show that almost 40% of those experiencing the greatest level of poverty are Latino and African American mothers (Smith, 2008). As Lister (2002) notes “humiliating treatment of Black welfare users, especially women who are more likely to mediate with welfare institutions, is one example of how everyday racism can exacerbate the experience of poverty” (p. 63). In addition, the media works to perpetuate racism among welfare recipients by often times showing white families for sympathetic stories about hunger and showing African American families for critical stories about welfare and other social programming (Miller, 2000).

Following the Great Recession, an even greater number of people reported being food insecure. As of January, 2015, the Census Bureau states that one in five children are currently in households where a parent is a recipient of SNAP. Prior to the recession in 2007, the number was closer to one in eight children (Census Bureau, 2015). Additionally, 40% of all teens in America suffering from homelessness—which is estimated to be between 320,000 and 400,000—identify

as LGBT (Learner, 2014). Many teens are rejected by their families and communities each year because of their sexual orientation and are therefore left on their own as young as 13 (Learner, 2014).

People with Disabilities and the Elderly

Worldwide, it is estimated that one in five of the world's poorest people are disabled (Lister, 2002). Moreover, disabled people are more likely to be out of work, and if they find work, they are more likely than non-disabled people to lose a job once hired (Lister, 2002). Some argue that poverty among the disabled should be viewed as another expression of institutional discrimination against peoples with disabilities given their inferior labor market position (Beresford, 1996). The link between food insecurity and people with disabilities is not well understood. However, researchers have found links between people with disabilities and two factors related to household income, which greatly affects one's ability to procure food. First, not only are disabled persons likely to be out of work, but also other household members are less likely to participate in the workforce full time (Huang, Guo, & Kim, 2010). People with disabilities also tend to need more services (i.e. medical and transportation) than their non-disabled counterparts, which can put a greater strain on the overall household income (Huang et al., 2010).

People tend to experience disabilities later on in life, adding to the strain on already low incomes for people in poverty (Lister, 2002). Also, the participation rate for SNAP among eligible seniors is currently very low (30-40%) as compared to the participation rate for the eligible food insecure population as a whole (65%) (Cawthorne & Americans, 2008). In general, retired people with lower incomes suffer greater levels of material deprivation as compared to

other low-income groups still working (Barnes et al., 2002). The disparities amongst older people facing poverty in the US, however, is often reflective of an underlying class, gender and ethnic division (Lister, 2002). With this in mind, concern is rising as the elderly population grows as the baby boomer generation reaches retirement age. In 2019, it is expected that the elderly population will reach 50 million. This increase in the elderly population will likely contribute to higher rates of food insecurity among seniors. A greater number of impoverished elderly, coupled with low enrollment in public assistance, could have implications on the health and longevity of many impoverished seniors.

Federal welfare programs have been implemented to help people who could not otherwise afford to procure food on their own. The programs are encouraged to counter some of the consequences related to household or individual food insecurity—such as increased risk of developing diabetes, and chronic illnesses like hypertension and cardiovascular disease (Hamelin et al., 1999; Seligman, Bindman, Vittinghoff, Kanaya, & Kushel, 2007; Slack & Yoo, 2005). Federal programs largely exist to provide a social safety net to those unable to afford life's basic necessities and ultimately to ensure a better quality of life. However, one of the limitations to federal food assistance programs in helping all of the nation's food insecure has been the eligibility and enrollment requirements (Currie, Grogger, Burtless, & Schoeni, 2001).

Eligibility and Enrollment of Public Food Assistance Programming

For each federal food assistance program, the applicant must prove their household income does not exceed a certain threshold. To become a SNAP recipient—originally called food stamps (Federal Food Stamp Act of 1964)—individual or households must have gross incomes at or below 130% of the federally-defined poverty line (Nutrition.gov, 2015). The

poverty line was originally created by Mollie Orshansky of the Social Security Administration, who found that food cost people in poverty approximately one-third of their income. Therefore, Orshansky recommended the poverty line should then be the cost of food times three (Fisher, 1992). The cost of food became known as the “Economy Food Plan,” which is a set of dietary guidelines for people with low income (Fisher, 1992). The Economy Food Plan was later replaced by the “Thrifty Food Plan” in 1975, which was said to have strained the cost of the program and does not match inflation rates (FRAC, 2012).

In order for a household with two adults and no children to qualify for SNAP, their income would have to be at or below \$20,460 before taxes, making them eligible to receive a maximum of \$4,284 in benefits per year (USDA-FNS, 2014). In addition, some states require that SNAP participants do not have assets that exceed \$2,250 in value. Assets do not include retirement or house value, but have historically included the value of the person’s vehicle, which is perceived as one of the biggest barriers for those who do not apply for the program (Daponte et al., 2006). However, between 2006 and 2010, more than 20 states, including Iowa, eliminated the inclusion of vehicles as part of the asset test for public food assistance (Mulligan, 2012).

As of January 2015, 46 million people were enrolled in SNAP (FRAC, 2015). In 2013, more than 20% of people, or 10 million, eligible for receiving SNAP were not enrolled (Feeding America, 2014). Some eligible non-participating households refuse to participate, while others lack information or the resources to enroll. Those that refuse to participate in SNAP have claimed that the time spent to complete the application is not worth the amount of benefits they would receive, or that they do not want to experience the negative psychological effects—including social stigma—associated with applying (Nord & Prell, 2011). Another justification for non-enrollment is due to the fact some people live in areas with low accessibility to food

stores accepting SNAP, which illustrates that increased enrollment in SNAP alone is not a comprehensive measure in understanding the magnitude of the food insecurity problem (Shannon, 2014).

However, increased enrollment in SNAP does serve as one indicator of change in national food insecurity. Policy makers can directly affect SNAP participation by changing both the transaction costs and the benefits of the program (Gundersen, Jolliffe & Tiehen, 2009; Huffman & Jensen, 2008). For instance, when PRWORA was enacted in 1996, it introduced more restrictions and subsequently food stamp (Now called SNAP) enrollment to fell 21% from 1994 to 2001 (Ganong et al., 2013). Alternatively, when SNAP benefits increased during the Great Recession, enrollment rose 18% from 2007 to 2011 (Ganong et al., 2013). However, it is also important to look at the number of people enrolled in SNAP and the composition of those enrolled (Klerman & Danielson, 2011). Following the change in restrictions during the Great Recession, Klerman et al. (2011) noted that the composition of SNAP recipients shifted. Before the Great Recession, a large percentage of SNAP recipients were also receiving cash assistance. During the Recession, a greater proportion of SNAP recipients were not receiving cash assistance, which could have meant a greater enrollment by people representing the middle class (Klerman et al., 2011).

Questions of whether enrollment in SNAP is effective in meeting a household's food needs has been a topic of debate for several years. Some note that SNAP benefits only last, on average, three weeks out of the month, which makes the program insufficient for households fully dependent on public assistance (Feeding America, 2014). Additionally, for those that are unemployed, public benefits do not seem to provide an adequate food safety net (Paynter et al., 2011).

To understand how changes in public food assistance policies have resulted in the institutionalization of the private emergency food network, it is important to look at historical events that illustrate political and economic change. Using two recent events, PRWORA and the Great Recession, one can understand how public opinion (and resulting political change) and economic changes can put pressure on the private emergency food system.

History of the U.S. Food Safety Net

The U.S. government has aided in food assistance since the Great Depression. Prior to the Roosevelt administration (1933-1945), public food assistance had never been the role of the government, but rather the role of private individual charities (Johns Hopkins Bloomberg School, 2010). During the Roosevelt administration, change to the public food assistance happened as early as 1939 when the government transitioned to providing food assistance by selling discounted food stamps that could be used to purchase excess commodity crops. Originally, when food stamps had to be purchased, one dollar would buy a person one dollar in orange stamps (could be used to buy any food) plus fifty cents worth of blue stamps, which could only be used to buy food deemed as surplus by the federal government (USDA-FNS, 2014). This served as both an agricultural support and a way to provide assistance to those in need (Riches, 2002). In 1964, the Food Stamp Act was passed as part of Lyndon B. Johnson's Great Society (Daponte et al., 2006). This was in part due to Johnson's declared "War on Poverty" movement, which was generally supported by the public given that it aligned with President Kennedy's previous popular priorities (Aaron, 1978). Additional impetus for federal intervention around hunger was the highly influential CBS documentary of 1968, *Hunger in America*, which illustrated the depth of poverty in the United States.

In 1977, the requirement to purchase food stamps was removed, which is said to have helped anonymize the recipients of food stamps (Suryanarayana, 1995). The removal of purchasing requirements is said to have dis-incentivized households from budgeting money towards food altogether (Daponte et al., 2006). The removal was also predicted to help incentivize more people to participate in the program, which did not end up happening (Brown, 1988). Research suggests that the removal actually created a greater demand for private emergency food to supplement the inadequate food budget provided by the government (Daponte et al., 2006). In other words, the removal resulted in families' no longer budgeting money for food, and instead, the "free" food stamps encouraged households to purchase food at the lowest cost or seek out other sources of free food (Daponte et al., 2006).

The Reagan administration (1981-1989) made one of the most notable changes to the structure of federal food assistance when they created Temporary Emergency Food Assistance Program (TEFAP), which supplies government purchased commodity foods to low income persons as a way to reduce hunger (USDA, 2014). In 1982, the Omnibus Budget Reconciliation Act was passed, which gave commodity foods to food pantries to be distributed in response to substantial budget cuts to the food stamp program (Daponte et al., 2006). Years later, TEFAP dropped the "temporary" from the name and just became "The Emergency Food Assistance Program," which may have been illustrative of the long-term vision the government had for the program moving forward. As a result of the cuts to food stamp benefits, America's Second Harvest (now Feeding America), the country's largest domestic anti-hunger relief program, reported that the number of food banks grew from 29 in 1980 to 185 in 1989 (Daponte et al., 2006). Today, private emergency food organizations are not only serving the food insecure, but also reducing corporate and federal spending through volunteer labor. Pantries are a direct

distributor of food from donors, corporations, and sometimes food bought at-cost by the pantry organization. Additionally, 90% of all food from TEFAP is distributed by the emergency food network (Feeding America, 2012). Pantries are doing corporations a service by offering a tax incentive while also picking up otherwise wasted food, saving them money from disposal. Some say this approach helps America manage poverty instead of eradicate it (Winne, 2008).

Since the advent of public food assistance, private charities have remained instrumental in distributing emergency food. The private emergency food system—which includes food pantries, food banks and soup kitchens—has been in existence for decades, but only began to significantly increase in size after 1980 and the large cuts to governmental food assistance programs (Tarasuk et al., 2005; Curtis et al., 1995).

Together, the 1980 cutbacks and PRWORA caused two of the largest decreases in the history of federal food assistance participation rates. According to the USDA Food and Nutrition Service (2015), the year 2000 represented the lowest enrollment since 1977 at 17.2 million, while 2013 represented the highest enrollment in the history of the program at 47.6 million people. The significant increase in participation rates attracts political attention from those concerned with cutting back the national deficit, especially since “U.S. welfare politics has become entwined with U.S. budgetary politics” (King, p. 1, 2000).

Impacts of PRWORA and the Great Recession

Beginning in 1992, Oregon was the first state to receive a waiver from the federal government to allow state control over their cash-assistance welfare programs (Ganong, et al., 2013). After Oregon’s successful petition, 36 other states followed suit, a move which is often said to have helped bring forth the 1996 welfare reform (Ganong et al., 2013). This trend towards

the “enabling state” can be contrasted with the “welfare state” by its emphasis on private and voluntary networks to provide an opportunity for people in need to seek “self-improvement” changes. The “enabling state” still exists today and has allowed for the variability of welfare program standards between states (Quadagno & Street, 2006; Gilbert, 2005). Moreover, the enabling state shifts responsibility from the public to private to provide social services, which is commonly referred to as “privatization,” seeking to reduce state responsibility and rely more on private support (Gilbert, p. 3, 2005).

In 1996, the system of welfare in the U.S. changed dramatically when President Clinton signed PRWORA into law. The act (often referred to as “welfare reform”) replaced the Aid to Families with Dependent Children (AFDC) program, which had been operating since the Depression, with a new program called Temporary Assistance to Needy Families (TANF) (Blank, 2002). The political climate influencing the 1996 reform was undertaken at least in part because the term “welfare,” which includes all social programming that help the needy, had gained a negative connotation of fostering dependency by some able-bodied adults (Dickerson, 1999). The growing perception of the difference between the “deserving poor” (those unable to work due to age or disability) and the “undeserving poor” (able-bodied adults receiving assistance without working) fueled much of the push for the new welfare requirements embodied in PRWORA (Dickerson, 1999).

Following PRWORA, cash assistance programming went through several changes. These included the switch from being a federal entitlement program to being funded through limited block grants—which are federal funds given to and administered by states—and a change in the emphasis towards welfare-to-work programming (Super, 2004; Kissane, 2006). Programs like

TANF are funded through block grants, which give states more flexibility to spend money on other forms of assistance to needy families like childcare and work related assistance.

PRWORA required that families enrolled in both AFDC and food stamps had to re-apply for each program separately, which required “certification (and periodic recertification) of their eligibility” (Currie et al., p. 207, 2001). The eligibility criteria required, for example, that a male without children between the ages of 18-50 go through recertification for food stamp benefits once every three months (Currie et al., 2001). However, following the Great Recession, the recertification time period of three months was temporarily waived (Center, 2014).

The welfare reform change of 1996 greatly affected overall food stamp enrollment due to tougher restrictions, following other cash assistance restrictions. Additionally, with the emphasis on shifting individuals from welfare to work, the U.S. perception of food insecurity became an even more individualized problem, which likely affected the number of people enrolled in the food stamps program due to negative perception and associated stigma (Super, 2004; Rogers-Dillon, 1995).

The theory that poverty is an individual problem is not new. Bradshaw notes that the individualization of poverty goes all the way back to the Protestant Reformation in the sixteenth century (2007). The reformation was key in placing importance on a strong “Protestant Work Ethic” (PWE), which placed great value in work and material success (Weber, 2002). In a study by Furnham (1982), he found that those that believed in the values of PWE (namely that hard work pays off) were more likely to blame individuals for their unemployment status (Furnham, 1982; MacDonald, 1972). Kahl (2005) connects the U.S. poverty policies to a Reformed Protestant tradition that places “work first” when offering welfare programming (p. 122). Kahl relates Protestant traditions to “fighting benefit dependency, promoting individual responsibility

for overcoming poverty, and helping people find jobs as quickly,” which they argue is representative of the U.S. approach to poverty policies (p. 118, 2005). However, many argue welfare reform measures, such as the 1996 cuts to cash assistance, have not successfully reduced poverty. Instead, the focus to transition people into the workforce has forced many households to shift budgets away from more flexible expenditures (such as food) towards things like childcare, which demands greater need for food banks as a supplement (Morgen, 2001).

The American Recovery and Reinvestment Act of 2009 (ARRA), the Obama Administration’s response to the Great Recession, included increased SNAP benefits (Mulligan, 2012). The ARRA increased the maximum annual benefits to SNAP recipients by 13.9% in 2009, a boost that lasted until November 2013 (USDA-ERS, 2014). As the economy grew following the Great Recession, pressure from Congress resulted in a budget cut of \$11 billion to SNAP in 2013-2016 (Hacker, 2004; Dean & Rosenbaum, 2013). However, recent research suggests that the impacts of the Great Recession on those with lower incomes will unfold over an extended period of time, suggesting that enrollment in SNAP is likely to remain high for several more years (Klerman et al., 2011).

The Private Emergency Food System

The largest private emergency food assistance organization in the US, Feeding America, has largely succeeded in filling the bellies of those in need by leveraging volunteers and corporate and private donors; however, these inputs can be unreliable during economic hardship. In 2014, two million people volunteered for a total of 100 million hours at a pantry or meal program within the Feeding America network (Feeding America, 2014). Prior to Feeding America’s beginning in 2008, the program was known as Second Harvest, which was first established in 1979 (Feeding America, 2014). The first food bank in the U.S. was started in the

late 1960s in Phoenix, AZ, with the mission of bringing otherwise discarded foods into one location for redistribution to those in need (Feeding America, 2014). This central mission is still relevant today.

In 2014, Feeding America obtained 1.2 billion pounds of food from retailers, which is food that would have otherwise been thrown away (Feeding America, 2014). In addition, they accepted and redistributed 897 million pounds from the manufacturing sector, 687 million pounds from federal commodities, 607 million pounds of fresh produce, and further purchased 547 million pounds of food to meet user demand (Feeding America, 2014). In total, the amount of food they diverted from the landfill in 2014 was 2.5 billion pounds, which is only 3.5% of the total amount of food estimated to go to waste every year in the U.S. (Feeding America, 2014). Some argue that reducing food waste has become, in some sense, a primary motive for food banks and pantries, with feeding people in need being a secondary priority (Tarasuk & Eakin, 2005; Winne, 2005).

Private food assistance organizations have been in existence for decades, but only began to increase in size since 1980 following a large cutback of governmental food assistance funding (Tarasuk et al., 2005; Curtis et al., 1995). Feeding America largely relies on food surpluses to provide food for those in need through a redistributive food network (Pfau-Effinger, 2005; Poppendieck, 1999). Food that ends up in food banks has often been rejected in the conventional marketplace (Tarasuk et al., 2005). Interestingly, the measure of success for Feeding America's partner agencies is based on annual distribution weight donated (Handforth, Hennink, & Schwartz, 2013). This success measure illustrates that the network's goal includes surplus redistribution for short-term hunger relief as opposed to addressing the underlying causes of food insecurity (Handforth et al., 2013).

Feeding America has publicly said that they see a “perfect storm” emerging, a combination of factors threatening the current procurement method of many food banks (Feeding America, 2014). As food prices increase, food waste from retailers will decrease (Feeding America, 2014). Also, charitable donations during an economic downturn tend to be reduced (Feeding America, 2014). Feeding America acknowledges that if there continues to be a decrease in public assistance expenditure, the demand for their services will increase at an unsustainable rate (Feeding America, 2014).

Feeding America lobbies for public food assistance to continue or increase as part of their anti-hunger campaign, and their affiliated food pantries have also started local initiatives to encourage pantry visitors eligible for SNAP to sign up (Feeding America, 2014). Currently, Feeding America (2009) takes the position that the public food safety net is inadequate, illustrated by the fact that 58% of SNAP recipients are also frequent (every month) or recurrent (at least 6 months out of the year) users of Feeding America’s food banks. Nevertheless, Feeding America’s mission of redistributing surplus foods as a means to solve hunger is an inherently short-term approach that does not address the larger causes of food insecurity, such as low-wages, social inequality, or poverty (Winne, 2005; Poppendieck, 1999; Curtis, 1997, Quadagno, 1999). However, Feeding America recognizes that hunger and poverty are two very different issues, and notes that they are best suited to directly address hunger issues (Feeding America, 2014).

In 2014, the number of people enrolled in SNAP was 46.5 million, which was almost exactly the same as the unique users utilizing Feeding America that year (FRAC, 2015; Feeding America, 2014). While the number of SNAP recipients has fluctuated over time, Feeding America reports only seeing a steady increase in demand since inception. As such, Feeding

America projects their continued existence contingent upon food resources available, funding, and the adequacy of governmental programming (Feeding America, 2012).

A report by the USDA estimates that the private emergency food system—including the volunteer hours and gleaned food value—is one-tenth the value of the federal nutrition safety net (Ohls, Saleem-Ismail, Cohen, & Cox, 2002). The largest component of the emergency food assistance program is the network of food pantries. As of 2001, 32,780 food pantries provided the equivalent of \$2.2 billion meals a year (Ohls et al., 2002). The food pantry network continues to serve a large number of food insecure individuals and households, and is integral to the nation's effort to provide a food safety net.

Lived Experiences of Private Food Pantry Customers

There is surprisingly little understanding of the lived experiences of those who use food pantries and the reasons for long-term demand for food assistance (Berner, Ozer, & Paynter, 2008). Rather, most recent research has focused on the health of food pantry users, the consequences of food insecurity, the consequences of users seeking food pantry assistance and not public assistance (focusing on non-SNAP participants), and understanding common characteristics of those that need food assistance (Gundersen, Kreider, & Pepper, 2011; Ziliack, 2015; Coleman-Jensen, Gregory & Singh, 2014).

A number of studies have looked at the coping methods of food insecure families making do with limited budgets. Fiese, Koester, and Waxman (2013) capture individual household experiences related to their inability to acquire other household needs (i.e. detergent, soap, etc.) unless they are offered by the food bank. This research indicates that money saved by going to the food bank does not mean more money allocated to other household needs, rather that there is

an overall stress on food insecure households to meet all basic necessities. Further, scholars argue that the effects of having inadequate food, as well as other non-food necessities, results in various emotional and physical consequences aside from impacts to overall nutrition, such as stress, worry, deprivation, and feelings of alienation (Frongillo, 2013; Hendricks, 2015).

Lister (2004) argues that the measurement of poverty itself must include a minimum standard of living and income (Lister, 2004). For example, the CPS survey for food insecurity measures a standard of living—such as inability to eat regular meals—as opposed to what the household makes per year. Lister argues that there must be a combined method for measuring standard of living and income to fully understand poverty (2004). Currently, private emergency food programs are only required to measure customer income if they distribute TEFAP food. More could be done at the individual pantry-level to better understand customer's standard of living by including similar or related surveys as indicators over the long-term.

Though it is well known that people often utilize both public and private sources of food assistance, little is known about the households and individuals that do so (Paynter et al., 2011). Additionally, few researchers have explored the scenario in which the need for short-term food assistance turns into long-term dependence on the emergency food system (Paynter et al., 2011)

A few studies have included the comparison between food pantry customers and volunteers in an emergency food situation (Hamelin, Mercier & Bédard, 2010; Edlefsen & Olson, 2002; Curtis, 1997). On one hand, Curtis (1997) found that the food pantry volunteers' experience at emergency feeding programs can help reinforce class-based stereotypes of the poor. Edlefsen found that food pantry volunteers do not have any better understanding of the poor than the general public (2002). On the other hand, however, volunteers at emergency feeding programs were able to utilize the experience as a way to learn and became more aware of

the problems, consequences, and causes of hunger in their communities (Poppendieck, 1997). One study focused on the discrepancy between customers and volunteers, and found that pantry volunteers focused on differing aspects of food insecurity (Hamelin et al., 2010). The results showed that while volunteers focused on the quantity of food available to the customer and lack of control over diet, the customers focused more on the unsuitability of the diet and the chain of events leading to food insecurity (Hamelin et al., 2010). These differences in experience of the food insecure versus that of the volunteer have major implications for the ability of food pantries to adequately address the actual needs of their customers.

Critical Theory and Transformative Paradigm as a Guide

This research focuses on the need for transformation amongst food insecure populations and the general public in order to address the root causes of food insecurity. To understand the complexity between the current status quo understanding of poverty and the transformation that must take place, I have employed critical theory along with a transformative paradigm. Critical theory helps bring to light unjust social arrangements in society. These unjust arrangements become obvious when comparing the current society to the guiding philosophies of the “good society” by Robert Bellah (1992), which offers principles of a society in which all humans are able to flourish (p. 4). In this case, food insecurity is the barrier to human flourishing. Before transformation can take place, the social arrangements that perpetuate food insecurity and poverty must first be recognized by the public and then altered based on the pursuit for a more equitable society (Cooke, 2006). However, Cooke (2006) notes that if society is guided by “faulty views of the good society” then transformation must take place to first remove the structural barriers that do not allow people to see the injustice of the current social arrangement (p. 10). This dilemma in society is best explained by Bellah:

“Walking in any American city today, one participates in a ritual that perfectly expresses the difficulty of being a good person in the absence of a good society. In the midst of affluence, perhaps with a guilty sense of absurd wastefulness of the expensive meal, new blouse, or electronic gadget that has brought us to town, we pass homeless men, or often, women with children asking money for food and shelter. Whether we give or withhold our spare change, we know that neither personal choice is the right one. We may experience the difficulty of helping the plight of homeless people as a painful individual moral dilemma, but the difficulty actually comes from failures of the larger institutions on which our common life depends (p. 4, 1992)”

The structural barriers that are perpetuating food insecurity in society are complex.

Originally, Marx claimed that the false consciousness of society, which perpetuates the status quo and denies human flourishing to some people, was socially produced in the interest of a self-maintaining socioeconomic system (Cooke 2006). However, this ideology has since been rejected by many because the theory assumes that the socioeconomic system itself is self-interested and self-maintaining, which is critiqued as out of date ideology (Cooke, 2006). Scholars like Habermas (1985) argue that society is instead suffering from fragmented consciousness, which acts as a barrier to viewing social structures collectively and prevents comprehensive holistic interpretations in the first place. What this means in this context is that since there is no consensus in terms of rationale around why food insecurity exists, the process of transformation cannot begin towards achieving food security. Thus, there must first be a collective understanding of food insecurity and poverty in order to identify and change the problems that exist.

Critical theory’s call for change to allow all humans to flourish fits well with the goals of a transformative paradigm as a research lens. The purpose of the transformative paradigm is to include marginalized groups into research who are typically not included to achieve positive social change (Mertens, 2010). By understanding how customers justify their situations as food pantry customers and how food pantry volunteers perceive their customers situation, I can

understand how both sides rationalize the problem of food insecurity. If the blame is placed on the individual rather than the negative social arrangements, it will show that transformation is first needed to remove structural barriers perpetuating this injustice.

Research Goals

The goal of this research is to understand the lived experience of individuals seeking private and public food assistance. The results of this study provide a more in-depth understanding of those who live in the gaps of the federal food safety net: food pantry customers who also receive federal food assistance. The results indicate that the frequency in which individual customers of food pantries utilize the pantry in a 12-month period is important in understanding the level of need amongst customers. Comparing the ways in which customers justify their experiences as food insecure individuals in relation to how pantry volunteers perceive them provides space for dialogue about some of the underlying stereotypes of pantry customers and their effects.

CHAPTER 3. METHODOLOGY

The main research questions that this research seeks to answer include:

1. What portion of food pantry customers are recurrent (visiting six or more times) visitors, and what portion are also seeking public assistance?
2. What are the lived experiences of individuals receiving food assistance from food pantries in Story County, Iowa, specifically in meeting their basic needs?
 - a. How do customers seeking private and public food assistance rationalize their situation?
 - b. What personal life changes have occurred to customers requiring public and private food assistance?
3. Do the perceptions of food pantry volunteers match their customer's lived experiences of being food insecure?
 - a. How do volunteers perceive customers seeking more than one type of food assistance (i.e. more than one pantry, also on public benefits, etc.)?
 - b. Do the rural (small and medium) and urban (large) pantries perceptions of their customers differ?

The research questions were answered by way of survey and interviews with customers, along with a focus group with volunteers from three food pantries in Central Iowa. While the survey component helped to answer question one, the in-depth interviews and focus group were used to answer research questions two and three. Given that this research works with vulnerable populations, non-exempt IRB approval was sought and granted for this research.

Transformative Paradigm

Since the population in this case—impoverished and/or food insecure—is marginalized in society, a transformative paradigm was used to develop an understanding of needed changes for this group (Creswell, 2013). A transformative approach was used to guide this research in a way that seeks to understand power differences in this work (Mertens, 2007). Mertens argues that Transformative research “is needed because research does not necessarily serve the needs of those who have traditionally been excluded from positions of power in the research world, and therefore the potential to further human rights through a research agenda has not been fully realized” (p. 212, 2007). Thus, the position of this research comes from a perspective of bringing the voices of those in poverty to the forefront, who are typically not intentionally included in research. Additionally, issues related to power in organizations serving the poor is addressed by comparing the results of the different research components.

Research Goals

This research begins broadly by trying to understand the depth of need of people coming to the three pantries by way of a survey. Then, by using the survey as a filter, food pantry customers were selected for in-depth interviews based on their status as public food assistance recipients. Additionally, a focus group with pantry volunteers helped to capture their experiences and perceptions of their food insecure customers. The survey builds on the focus group and in-depth interviews through a convergent design (Creswell, Klassen, Plano Clark & Smith, 2011). The in-depth interviews were meant to dig deeper into the survey results by asking “why” questions to explore the customer and volunteer perspective. However, the data was gathered concurrently, so there was no analysis of the surveys prior to the interviews due to timing. A

concurrent transformative paradigm was chosen since the research questions entail bringing together diverse groups with the goal of increasing social justice for food insecure populations (Mertens, 2010).

Three food pantries were chosen based on five main criteria: volume of customers, partnership with the Food Bank of Iowa (largely, Feeding America), volunteer-based organization, activity level in United Way Story County Food Pantry Collaboration meetings, and inclusion in a 2010 survey conducted by United Way of Story County. These criteria were used because the objective was to look at three scales of food pantries in the county (small, medium, and large) for which there is prior longitudinal data and that have volunteers that engage in regular collaborative discussions. This filter resulted in just three qualifying pantries.

Table 1. Criteria for choosing the food pantries

Criteria	Reasoning
Partnership with the Food Bank of Iowa	Ability to source primary data; make research transferable to other partnering agencies
Volume of customers	Research was conducted by scale of customers served—small, medium, and large
Volunteer-based	Criteria was used because a substantial number of pantries in the U.S. are volunteer-run
Active in the United Way Story County Food Pantry Collaboration	Provides reassurance that the pantry is interested in collaborating and implementing best management practices
Inclusion in previous 2010 survey	Provides general longitudinal data of customers at each pantry

In order to understand the broader context of food pantries in Story County, I convened one focus group with food pantry volunteers, collected 64 surveys and 9 in-depth interviews with customers, and conducted a final member check with anti-hunger leaders in the county. In addition, my relationship with a leading social services group—United Way of Story County—

provided me with access to documents from past research and collaborative meetings related to the status of the three pantries, which dates back to since 2007. These methods will each be explained in depth.

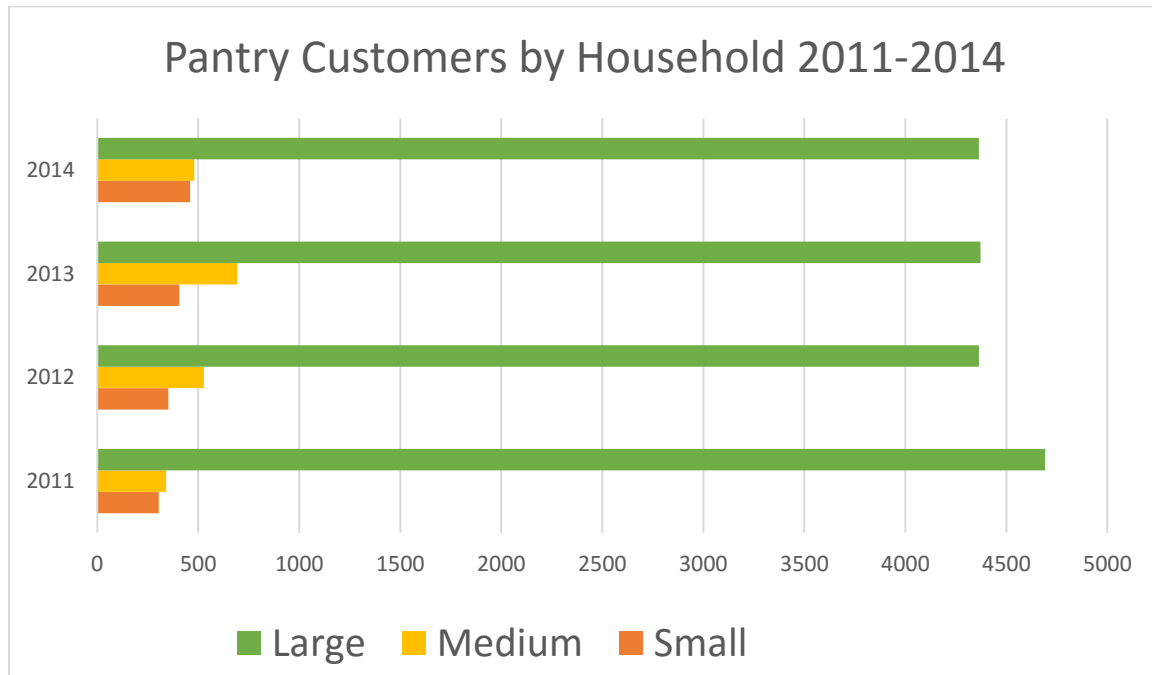


Figure 1. Number of customers coming to each pantry

Though the differences between the small and medium pantries are slight compared to the difference between the medium and large pantry, the number of customers in light of the community's overall population was an important factor. Looking at the pantries per capita customer totals, the number of customers going to the medium pantry (480) and the small pantry (460) becomes more significant. In 2013, the medium pantry's community had a population of 1500, as compared to the small pantry's population of 3,385 (Iowa State Data Center, 2014). Therefore, the relationship of customers to total population of the small and medium pantries contribute to their identity as "small" and "medium."

Customer Surveys and Population Selection

Surveys were designed and personally distributed at each of the three pantries during their hours of operation. Typically, the customers of the pantries would arrive earlier than the opening time, which allowed time to fill out the surveys. The surveys were voluntary, and I offered to either fill out the survey with the customer, or for them to do so individually. The surveys were only provided in English.

An added incentive for filling out the survey was that one person from each pantry that filled out a survey would be randomly chosen to get a ten dollar healthy food voucher. By having this added incentive, customers were more likely to add their personal address for mailing the voucher, which would later be used to do spatial analysis. Surveying was conducted at each pantry until three in-depth interviews were conducted at an individual pantry. The survey was used as a filter to find interviewees. Whether customers responded “Yes” to two survey questions, including a question asking whether the person received federal food assistance and if they would be willing to be interviewed, determined whether I would approach the individual for an in-depth interview. The reason I wanted to speak to customers also receiving federal food assistance was to try to understand where public food assistance was falling short and what individual customers were doing to adapt. Questions from the survey included but were not limited to:

- How many times in the past 12 months have you visited this food pantry?
- Do you visit more than one pantry a month? (If yes, please name them)
- If there were no restrictions on how many times per month you could visit this food pantry, how many times would you need to come?

- Do you or anyone in your household receive benefits from a governmental food assistance program(s)? (SNAP, WIC, School Breakfast Program, School Lunch Program, or other)
- How many individuals in your household regularly work for pay?
- If selected, would you be interested in being contacted for an interview in which you would receive a \$10 healthy food voucher for your time?

The survey questions were drawn from a 2010 survey conducted for the Hunger Task Force—a non-profit group that advocates, educates, and lobbies for food programming on a national level—in Milwaukee County, Wisconsin. The survey was aided by a national fellow from the Congressional Hunger Center, which seeks to elevate hunger issues on a national policy level. The group also conducted short interviews with pantry users to add another dimension to the survey. The interview’s flexible structure allowed more insight into the experiences of pantry customers (Hunger Task Force, & Hunger Center, 2010). The survey questions were mainly categorical, but also included a few open-ended answers. Of the 64 surveys, 41 were conducted at the large pantry, 14 were conducted at the medium pantry, and 9 were collected at the small pantry.

In-Depth Interviews

The purpose of the interviews were to provide more context from the perspective of the customers than the survey alone could provide (Sieber, 1973). The first customers to fill out the survey and that met the criteria—agreeing to being interviewed and also on federal food assistance—were approached for an interview on the spot. Therefore, the nine interviewees were the first customers to have answered “yes” to the two filtering questions, and that followed

through with meeting me for an interview either that day or at another designated time. The nine total interviews included three customers from each pantry.

The interviews lasted between 36 and 55 minutes, and were held at locations such as nearby churches, restaurants, and in one instance, a person's home. All three pantries were located at or adjacent to a church. Questions for the in-depth interviews included but were not limited to:

- Can you provide me with a bit of background about yourself? [Employment history, education, family history, age, any major calamities, etc.]
- Walk me through a typical day in your life. Imagine that you are hungry and need to get food. Where do you go, and how do you get there?
- Do you visit more than one pantry a month? If so, can you tell me a bit about it?
- If you could suggest any program or service to be offered that could help you (and others) become food secure, what would it be?
- What are your feelings towards receiving food assistance?

Focus Group

A single focus group was conducted with volunteers from each of the three pantries. Six volunteers (two from each pantry) were invited, however only five participated in the focus group. Effective focus groups can include between four and twelve individuals, with the most desirable group number between seven and ten (Krueger, 1988; Linville, Lambert-Shute, Fruhauf, & Piercy, 2003; Smithson, 2008; Kreuger & Casey, 2009, Franz, 2011). Volunteers were recruited based on snowball sampling. Names and contact information of volunteers were provided to me by United Way of Story County's Food Pantry Collaboration coordinator. The

first contact from United Way was then contacted and asked to recruit one other volunteer for a focus group.

The focus group lasted about an hour and fifteen minutes, and included questions related to each of the three food pantries' operations. The volunteers present each had been involved in their respective food pantry for a number of years, ranging from 5 to 29 years. Each volunteer noted that their commitment to their pantry included monthly, if not weekly, volunteering. Although they were all engaged in emergency food work, an important common denominator for the focus group (Kreuger & Casey, 2009; Franz, 2011), I found that the volunteers from the two rural pantries were more friendly with each other since they had interacted often at the United Way meetings in the past. This required that I step in and purposefully pull in the perspective of the larger pantry at times. Some of the questions from the focus group included:

- Imagine that it is my first time coming to your pantry. What would I need to do or bring in order to get food assistance?
- Have you seen a recent increase in those seeking food assistance? If so, why do you think that is?
- Where do you get your volunteers? Would you say volunteers are difficult to obtain?
- What (if anything) would you change about your food pantry to make it better for the users?

Though questions for the focus group were related to their pantry's operations, the resulting conversation focused primarily on their pantry customers. Even though the conversation may have resulted from an "unfocused focus group," the discussion brought new insights into how the volunteers perceived their customers food insecure conditions (Franz, p.

1380, 2011). The resulting data from this focus group was analyzed at the individual level, not the pantry level. Thus, the quotes were meant to be representative of individual volunteers, not the food pantries.

Member Check

Upon finishing the data collection, a member check was conducted on August 20, 2015, to share preliminary results and themes. This meeting took place at a regularly scheduled Hunger Collaboration meeting, which is a collaborative of anti-hunger leaders (pantry volunteers, social service organization employees, and active citizens) in Story County, Iowa. The format of the meeting included a PowerPoint presentation describing the research process, results from the surveys, interviews, and focus group, and implications for these findings as they relate to United Way's current work on the anti-hunger front.

Around 20 people attended the presentation, including two people from the Food Bank of Iowa. I recorded the discussions as a reference for their reactions to the presentation. Additionally, I shared all of the materials with the food pantry volunteers involved in the focus group since they were unable to attend.

Data Analysis

I transcribed all of the nine customer interviews and the focus group verbatim. All survey data was added to a spreadsheet for further analysis. Descriptive statistics were used to identify basic trends at each pantry, using averages for open-ended or single answer questions and median for categorical answers. For all qualitative information, NVivo 10 was used to sort and analyze the data into themes. The themes that emerged from the interviews and focus group were

put in conversation with one another where appropriate. Since the focus group's discussion was largely on about their customers, there was an obvious opportunity to juxtapose customer and volunteer quotes to highlight the gaps between customer experiences and volunteer perceptions about their customers. The transformative paradigm approach helped me to raise awareness of the typically marginalized food insecure community in Story County with the anticipation that it could bring about positive social change (Creswell et al., 2011; Mackenzie & Knipe, 2006).

The results of the focus group, the in-depth interviews and surveys were integrated by converging the data sets in the results section (Creswell et al., 2011). All transcriptions were coded twice, with the first cut being a more descriptive approach, and the second using a more conceptual approach. The first round of coding involved over 57 categories, while the second round used 23 categories and utilized a more hierarchical system of analysis. Specifically, I sought out similarities and differences between customers, between volunteers, and between customers and pantry volunteers. These were then organized under themes guided by an in-depth analysis of the meanings behind the quotes captured.

Credibility

The survey data was not intended to be representative of the entire population of the county. Given that I only conducted surveys until I had completed three interviews from each respective pantry, I was unable to get a large sample. Additionally, since the pantries do not count unique users, it would be difficult to determine a representative sample size for each pantry.

The data in this study helped in triangulation by involving several different informants, background material, and a survey component to help boost the credibility (Creswell, 2013). Using triangulation in qualitative research approaches including interviews and focus groups

helps maximize respective benefits and compensates for their individual limitations (Guba, 1981; Brewer & Hunter, 1989; Shenton, 2004).

I realize that my biases in this subject—right to food—affected the type of questions I asked. However, using NVivo, I allowed themes to emerge based on their frequency. Throughout the research, I acknowledged my biases and often would write down my thoughts during data collection. This research is by no means subjective, but the process did involve reflection and careful analysis throughout to provide a balanced approach.

CHAPTER 4. RESULTS

Findings from this study help fill the gap in the literature involving people's need for food pantries in Story County, Iowa. The purpose of this chapter is to share themes related to the research findings from the customer surveys and in-depth interviews, and volunteer focus group.

The small, medium, and large pantries in this study participated in a 2010 survey conducted by affiliates of United Way of Story County. That survey included many other pantries, but for this research, I used the results of the 2010 survey for longitudinal data. This survey was conducted during two months in the winter (February and March) and two months during the summer (July and August) of 2015. Given that there were no customers who took the survey from the small and medium pantries during the summer months, results from the winter months will be used as a comparison. There was a large discrepancy in the customer response rate in 2010 for the larger pantry (n=465) versus the 41 that I captured in 2015; however the response rate for the medium (n=15) and small (n=9) pantries were nearly the same as what I captured in 2015, which was 14 and 9 customers, respectively. Thus, it is still useful to compare the results from the two pantries with this information in mind.

Table 2. Frequency and Total visits to each pantry

2010 Survey	7 or more times (2010)	Number of Customers (2011)	2015 Survey	6 or more times (2015)	Number of Customers (2014)	Percent Change times visited	Percent change customer levels
Large (n=465)	24.1%	4,692	Large (n=41)	56%	4,400	31.9%	-6%
Medium (n=15)	0%	341	Medium (n=14)	57%	480	57%	40.7%
Small (n=9)	40%	304	Small (n=9)	67%	460	27%	34%

Data for number of customers begins in 2011 because that is when the food pantries began their partnership with the Food Bank of Iowa, and therefore, began reporting numbers. From the time the original survey was conducted in 2010 to when I conducted surveys in 2015, the percent change of customers utilizing the pantry more than 6 months out of the year was 31.9% for the large pantry, 57% for the medium (allowed customers to start coming twice a month in 2012), and 27% for the small pantry. Additionally, the percent change for the number of customers coming to the pantry in 2011 versus 2014 was -6% for the large, 40.7% for the medium, and 34% for the small. As for the decrease in customers from 2011 to 2014 at the large pantry, this could be due to the discrepancy in sample sizes between the 2010 and 2015 surveys. Since the number of total customers has increased for the small and medium pantries, it could be said that more pressure is being put on these food pantries, which may not be able to be sustained long-term. Also, since unique users are not counted—only total customers are reported—it may be that the increase of pantry customers is the result of more repeat customers. This could be a sign of long-term, chronic food insecurity rather than a growing need for short-term emergency assistance.

Customers Surveyed

The customers seeking food assistance at the three food pantries were similar demographically. The median age of the respondents for the large (n=41) and medium (n=14) pantries was 41-50 years old. The small pantry (n=9) respondents had a median age of 31-40. Almost all of the respondents identified as white. Two respondents, one from the small and one from the medium, identified as Latino. At the large pantry, six out of 41 identified as a race/ethnicity different from white including, two African Americans, one Asian, and three

Latinos. The demographics of the customers respondents are similar to that of the state average, which has a population with a median age of 38 (2013) and is 92% White.

Table 3. Results of the Customer Survey (For full survey, see Appendix B)

	Small (n=9)	Medium (n=14)	Large (n=41)
Percentage of respondents that go to more than one pantry a month	61%	21%	44%
Percentage of respondents that have visited the pantry six or more times in the past 12 months	67%	57%	56%
Percentage of respondents also receiving federal food assistance (SNAP, WIC, or Breakfast/Lunch programs)	67%	57%	49%
The median amount of times a respondent would like to visit their food pantry if restrictions were removed	2 times	3-4 times	2 times
Percentage of respondents traveling to the pantry by car	89%	86%	73%
The median number of people in the respondent's household	4	4	4
Average number of people in a respondent's household regularly working for pay	0.9	1.07	0.93
Median age of respondents	31-40	41-50	41-50

Similarities can be drawn across the three food pantries, including the fact that the customers are able to “shop” for food at each location and present the same required paperwork to show eligibility. A few differences between the pantries are relevant to note. First, the large pantry was the only one that did not require local residency to come to the pantry. This was evident by looking at the addresses provided by the large pantry customers who filled out the survey; only 32 customers from the large pantry provided their address as it was optional. Looking at Figure 2, which was created using GIS to map the addresses of customers compared to the location of the pantries, it shows that the large pantry has 9 out of the 32 customer respondents coming from a distance longer than 10 miles. Since the medium and small pantry

require local residency, their customers are coming from much closer distances.

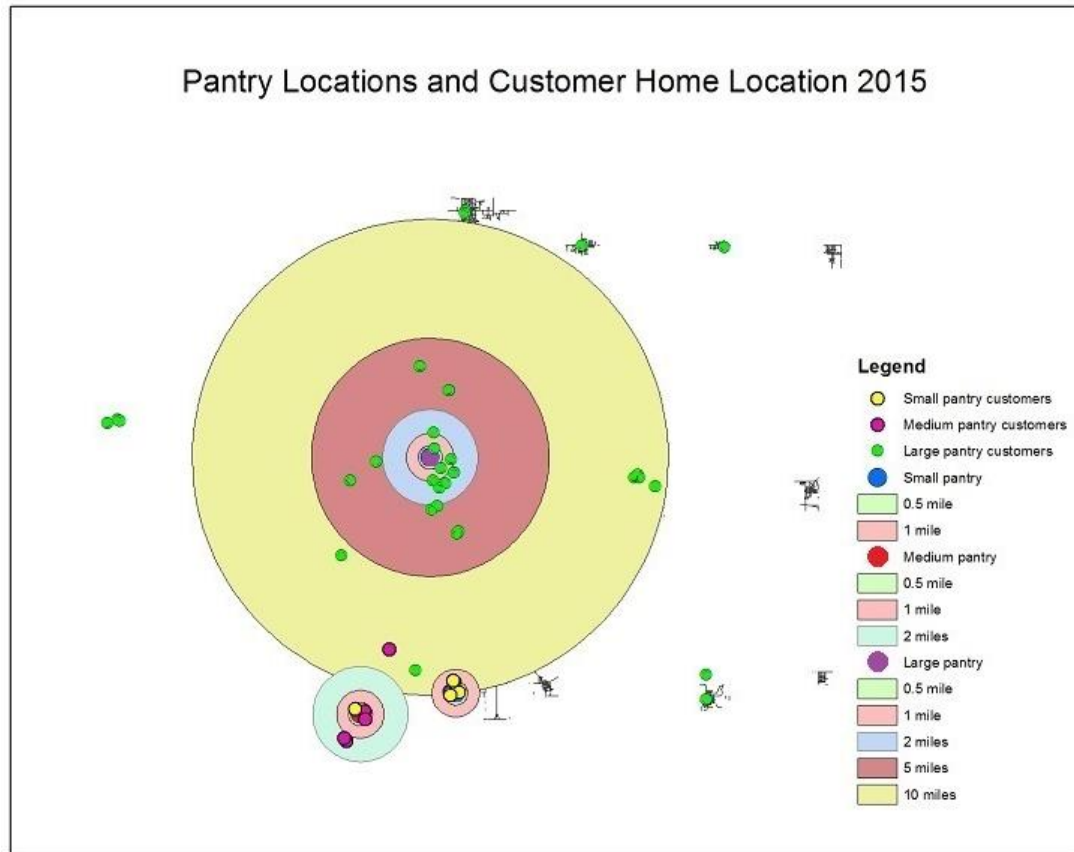


Figure 2. GIS map showing where pantry customers are coming from to get to their respective pantries

Second, the medium pantry allowed their customers to visit twice a month instead of once; this difference likely affected the answers to two questions—the percentage of customers going to more than one pantry a month and the median amount of times a customer would like to visit their food pantry without restrictions. In talking with Melissa (pseudonym), the medium food pantry volunteer who helped start the pantry, she said,

“It’s been about 3 years [since we moved to twice a month]... First we said, you have to go to human services and prove that you have SNAP and, you know, that you need extra then we just decided, we’ll just let ‘em come twice a month. Half of the people do and the other half do not. They only come once a month.”

Across all three pantries, between 49% and 67% of customers reported receiving federal food assistance. The survey results indicate that half, or more than half, of the customers visiting the food pantries are not receiving adequate public benefit levels to meet their monthly food needs. Moreover, 14 out of the 64 respondents, or 22%, noted on the survey that they were deemed ineligible for federal assistance because of their income.

The percentage of people visiting more than one pantry (61% small, 21% medium and 44% large), the number of customers visiting six or more times in a year (67% small, 57% medium, and 56% large), and the median number of times people would like to visit the pantry per month (2 times, 3-4 times, and 2 times, respectively) may illustrate that a large percentage of people going to the pantries are relying on the pantries for their sole or primary food source. Additionally, it may signify that individuals are adapting to other budgetary constraints or changing conditions within their household. Without these pantries, the level of very low food insecurity in Story County would likely go up.

Throughout each of the pantries, the average number of people working in the customer's household was right around 1 person (0.9 at the small, 1.07 at the medium, and 0.93 at the large pantry). Further, the median number of people in a customer's household was four. Having few or low-wage workers in the household contributes to less income to acquire resources. In addition, jobs with low wages or seasonal jobs often do not offer full benefits, such as paid sick leave or medical insurance.

Table 4. Comparing in-depth interviewees (n=9) to the general survey population (n=64)

	Summary of all interviewees (n=9)	Summary of all survey data (n=64)
Percentage of respondents that go to more than one pantry	66%	42%
Percentage of respondents that have visited the pantry six or more times in the past 12 months	89%	58%
Percentage of respondents also receiving federal food assistance	100%	58%
The median amount of times a respondent would like to visit their food pantry if restrictions were removed	2 times	2 times
Percentage of respondent's traveling to the pantry by car	88%	83%
The median number of people in the respondent's household	2	4
Average number of people in a respondent's household regularly working for pay	0.44	0.97
Median age of respondents	41-50	41-50

Customer interviewees mentioned a variety of hardships, most notably those excluding them from going back to work. Some of those barriers to work included occupational injury (2), chronic illness (2), disability from car accident (1), or in one case, retirement. In addition, eight out of nine of the customers interviewed said they had visited the pantry six or more times in the past 12 months, which is greater than the average of all three pantries (58%). Due to the fact that the customers interviewed qualified for public assistance and also frequently went to the pantry, I identified them as most at risk to experiencing very low food insecurity. Given this, the themes and results of the interviews should help to inform social services organizations of the ways some of the most at risk citizens in Story County are adapting and making do each month. In addition, these stories are juxtaposed with their respective pantry volunteers to better position the understanding food pantry volunteers have about their customers and how that influences the operation of the pantries.

In order to help anonymize the volunteers and customers, I have created a table of pseudonyms. To help keep track of which pantry, the first letter of each name starts with the first letter of the pantry. For instance, “Sarah” begins with an “s” for the small pantry.

Table 5. Table of Pseudonyms for customers and volunteers

	Customer Name	Customer Name	Customer Name	Volunteer Name	Volunteer Name
Small pantry	Sarah	Sylvia	Steve	Sue	Stacey
Medium pantry	Mike	Max	Marcie, Matt (husband)	Melissa	N/A
Large pantry	Lucy	Luke	Leslie	Lindsey	Laura

Themes from Interviews and Focus Group

In many ways, the food pantry volunteers were focused on different aspects of the food insecurity experience (namely individual reasons for food insecurity) while the food pantry customers talked about how they lived with limited resources. Customers mentioned food and gasoline as flexible budgets, or items that could be sacrificed in order to have enough to pay for other non-flexible necessities, like rent, medicine, and transportation. Given the trends found in the interviews with customers, I quickly realized the need to view food assistance as one part of a spectrum of the individual’s monthly needs.

The themes that emerged from the focus group and interviews focused on similarities and differences between customers and volunteers, between volunteers, and between customers. Of particular importance in this research was the differences between the volunteers and the customers. The differences were positioned in a way to illustrate the gaps in understandings by the volunteers. These gaps, or misconceptions, can act as barriers for volunteers to understand and address the full needs of their customers. The themes will utilize quotes from customers and volunteers in almost every section.

Themes: Othering

Throughout the focus group and interviews, I heard several instances of othering. For instance, some customers identified themselves as being different from “other abusers [customers]” of the pantry. Volunteers also separated themselves from the customers by using terms like “they” or vague descriptors like “poor people.” Lastly, there was othering occurring between the urban and rural pantries. The term “othering” refers to the

“Discursive processes by which powerful groups, who may or may not make up a numerical majority, define subordinate groups into existence in a reductionist way which ascribes problematic and/or inferior characteristics to these subordinate groups. Such discursive processes affirm the legitimacy and superiority of the powerful and condition identity formation among the subordinate” (Jensen, p. 65, 2011).

Throughout the interviews with customers, I asked a question regarding the how long ago the interviewees first visited their pantry. Customers’ answers ranged from 3 to 15 years. Interestingly, there was a common theme amongst the customers who had begun visiting the pantry more recently than the others. I asked Leslie, who started coming to the large pantry six years ago, about how she felt about coming to this particular pantry to receive food assistance.

“I think it’s great that it’s [the pantry] there as long as people don’t abuse it, which I try not to do... And I know people do abuse it. When we went with a girlfriend of mine, um, somebody I did know that was with her and she had like 3 people in the family but she said she had like 5 or 6. And then me and my friend were talking about that later and she’s like I would never lie about you know, when I’m given something like that, I never lie about how many people are in my family.” (Leslie, customer)

During this conversation, it felt as if the Leslie was trying to separate herself from some of the stereotypes related to “abusers” and “free loaders” coming to the food pantries. Mike, who began coming to the pantry five years ago, was asked whether he thought customers being untruthful about how many were in their household was a tactic for them to get by or otherwise.

“Like I say there’s different types of people and some of ‘em take advantage of it and some of ‘em don’t. Some of ‘em are just as a, you know, surviving it, you know. And

they need it and they're honest. And then other people that really, I this is the way I feel, that really don't need it. They lie about how many people and stuff like that." (Mike, customer)

The sentiments about people abusing food assistance was shared by several volunteers, and was often referred to as customers working "the system." The customers that seemed to speak about abuse also talked about how they used to not need assistance.

Out of the customers I interviewed, I gathered that five of the nine did not grow up in poverty. This seemed to make a difference in how they talked about their present situations, noting that they were once in a position where they did not need food assistance. These customers often mentioned how they were different, and at one time, independent from social programs geared towards the poor. As such, some of these customers would bring up "abusers" frequently to talk about how they were different from the "stereotypical pantry user" to help explain that they were different.

"I think he's [my partner] been on the down and out most his life so it [receiving food assistance] just feels natural for him. I've been on kind of higher waters and my both my parents worked at ISU and we had a nice two story house out on a four acre land with a river running through the back yard. We had money." (Sylvia, customer)

"My husband ended up getting a really good job and making a lot of money and we didn't need food pantries and whatever. Matter of fact we donated to food pantries when we were in that position." (Leslie, customer)

"It's kinda, bothering because I'm used to working and used to givin' to places like that the churches, the homeless and now it's the other way around. It's kind of bothering but also we're very thankful that they're there." (Marcie, customer)

Conversations about abuse were often brought up by the small and medium pantry volunteers. Both the small and medium pantries are located in rural towns directly adjacent to one another, and both give out food vouchers to customers for the same grocery store at a value of fifteen dollars. During the focus group, the volunteers started talking about "doubling up" in

relation to a question I had asked about whether people go to pantries further away to avoid stigma. The medium pantry volunteer noted,

“We [small and medium pantries] both use the same grocery store. So if we have someone brings a voucher from both food pantries to the grocery store, we get a phone call. Now the bigger pantries aren’t gonna have that.” (Melissa, volunteer)

The ability to know their customers by their faces was mentioned often in the small and medium pantries. Even Sylvia, a customer from the small pantry, mentioned this when I asked what the best part of the pantry was for her.

“I like for the [small] pantry I notice that there’s one lady that’s always there and so when [my partner] went this past time and he didn’t have a piece of mail because you’re supposed to bring a proof of where you live and it has to be in [that small town]. Um, she was working and she was like “oh, you’re fine I know who you are go on through.” I mean I like that.” (Sylvia, customer)

To Sylvia, volunteers knowing their customers’ faces was helpful, especially if something like forgetting paperwork would otherwise hinder the customer from getting food that day. Though knowing their customers helped volunteers identify double users or allow regulars to get through without all of their paperwork, it did not seem to help in their understanding of *why* their customers are going to multiple pantries. When I had asked the volunteers what percentage of their customers they thought worked, they changed the topic to most of them having an income. Then the conversation led to the small pantry volunteers talking about the “occupation” of visiting more than one pantry. The other small pantry volunteer notes, “It’s like, this is what we [customers] do. Like we go to church on Sunday, we go to the food pantry on Wednesday at this town and on this day I think it’s just [habitual]” (Stacey, volunteer).

Additionally, the volunteers tended to generalize or use pronouns such as “they” or vague descriptors like “poor people” when talking about customers. This form of othering was used in several contexts, including talking about the type of customers coming to their pantries and their

habits. When I asked “would you say your pantry has been stressed economically in the last 5 years? And if so, how have you adapted?” Sue immediately talked about their pantry’s customers.

“Well and not to generalize but I will, we had a large trailer park and they were not economically (clears throat) well there was some poor people there that used us a lot, and then they raised it [the rent price] and now it’s no longer low income housing because they raised it and we first thought, well that will make a difference because we lost a lot of our clients because they were residents of the trailer park. But then, it, it hasn’t really changed that much.” (Sue, volunteer)

Additionally, I had asked about what each pantry defined as “success” at their pantry. Many volunteers mentioned getting food to people with dignity. Sue mentioned that she didn’t think customers felt judged by coming to her pantry, which she felt was important. On the topic of dignity and getting food to people in need, Melissa follows up by bringing up a comment that identifies customers as “they” and groups them as a category instead of as individuals.

“Though we had an interesting thing happen. Our church on Wednesday night, which is when we’re open, has a meal which is donation only. And so we’ve invited the food pantry people to come and eat free. They don’t. They won’t. But they’ll stand right outside the door and wait for the food pantry, so it’s not that they want to be seen there, because they are seen there.” (Melissa, volunteer)

There was also othering happening between the rural and urban pantry volunteers at times. The rural pantries both seemed to “team up” and pick out differences between their pantries and the large urban pantry. For instance, the rural volunteers talked about how their pantries were able to serve locally and how that may protect against “abusers.” There was some back and forth conversation between the urban pantry and the rural pantries that suggested some degree of tension. Following a discussion on the difference between the pantries, there was a conversation about how the large, urban pantry does not ask for residence; “I mean we [urban pantry] have people from your [rural] towns, from your locations. And that’s okay. Because we

have the money” (Lindsey, volunteer). This was an instance where the urban pantry was talking down to the rural pantries, possibly because of the number of customers they serve. At the same time, however, the rural pantries seemed to think that the urban pantry had it easy given its location and plethora of volunteers, which will be discussed later.

Themes: Stress and Pantry as Survival

The justification that the three customers from the small pantry gave was a contrast to idea that visiting the pantries was a “habit,” which had been offered by Stacey, the small pantry volunteer. To them, going to multiple pantries was a last resort, and something they only admitted to doing when they were desperate for additional food. When I asked Sarah about where and how she gets food when resources are low, she mentioned:

“I mean the first response [if I ran out of food] I would ask is family. If family couldn’t help I would go to other places because I know there’s other people hurting more than I am so I feel bad taking from them. But yeah if I didn’t have a way to get there I would ask for a ride from family or find the nearest place and try and walk there. Gotta have food for the family. Can’t go without it.” (Sarah, customer)

Almost all of the customers interviewed mentioned “survival” as a reason for going to the pantry. Additionally, almost all of the interviewees mentioned some kind of self-restraint because there were “people worse off.”

In relation to the customers self-restraint out of a concern that the pantries would not have enough food, the focus group revealed that restrictions for food pantry customers to only come once a month is admittedly not set because of financial reasons or food adequacy. In the case of the large food pantry, customers can only come once every 30 days. “People give generously financially. So our balance keeps going up even though we keep trying to spend it” (Laura, volunteer). In other words, these three pantries were not struggling with keeping food on

the shelves because of financial resources. This differs from the customer perspective which perceived that the greatest challenge for the pantries is food adequacy.

“And she said ‘as long as it fits in your bag take as much as you want’ and I was like oh my goodness. I still kinda skimmed [on what] I needed, you know, somebody else needs this more than me ‘I’ll just take a couple.’” (Sarah, customer)

When customers had difficulty getting public assistance, or had significant benefit cuts, they were forced to adapt. Going to the food pantries was one way that many people mentioned they were able to adapt to changes. In addition, “stress” was an underlying theme that resulted from constantly adapting and coping with limited budgets. When talking with Matt about his experience with his insurance through the VA, he spoke of the many hardships him and his wife have faced.

“Trying to get medical treatment to take care of us is a big cost... We worry about each other and kinda make sure the other one has what they need. But I get stressed out just trying to make sure, wondering how things are gonna get done.” (Matt, customer)

Some customers expressed that finding out about pantries and other emergency food sources was an adaptive measure for those struggling to put food on the table. When I asked Mike what program would be helpful to others in his community facing food insecurity and poverty issues, he initially said more advertising that there is a pantry. Then he continued to say that finding out about the pantry is a necessity for those that need it to survive.

“I mean, there’s probably a lot of people [who] don’t know there’s a pantry here that’s lived here their whole life. But obviously they don’t need the resources of the pantry either I mean because there’s a survival trait is searching out and finding out what your resources could be and a lot of people have it well enough that they don’t have to go through the thought process or anything of finding out there is help available. And that even I guess that’s the start of reaching out for yourself or surviving is to, uh, find out these different programs that are accessible.” (Mike, customer)

Customers frequently mentioned going to the pantries as an adaptation of living on a limited budget. However, from the perspective of the volunteers, the discussion and socialization between customers about other pantries was seen as strategic and as trying to work the system. Volunteers often insinuated that rules were important at the pantry for many reasons, one of which being control over customers.

In contrast, many customers I interviewed had many questions regarding public and private resources, including a government phone, how much in benefits they would get for disability or Supplemental Security Income, and locations of other food pantries in the area. “When you get on Medicare do they take you away Medicaid? You know, stuff like that. Is state gonna stop helping once federal government starts helping?” (Sylvia, customer) Answers to these questions could help them leverage more assistance, or even reduce the stress from not knowing what was to come. But had I not prompted the interviewees to talk about their knowledge of resources, this may not have come up. Additionally, many mentioned that they did not own a computer and or did not have reliable internet, which makes finding out about resources more difficult.

Themes: Policing against “Abusers of the System”

Often, the pantry volunteers spoke about customers being self-policing, meaning that they would call out others they didn’t feel needed the assistance. Volunteers supported this as another way to control “abusers” of the pantry. The volunteers were discussing their internal conversations as to whether their organization was a “hand up or hand out” when Lindsey mentioned:

“I do find that there is some policing among themselves. Um, they’ll say ‘she has a really good job, why is she here?’ and we have been known sometimes to say to that person

‘you know, we serve people that desperately need food, do you desperately need food?’ So, that has happened” (Lindsey, volunteer).

Though seemingly helpful to the volunteers at the pantry, this type of attitude may also serve to perpetuate stereotypes and stigma that often goes along with food pantry usage. I asked Sylvia “Do you get enough in food stamps to provide for yourself for the full month?” To this, she responded,

“No, I have to go to food pantries for when I don’t have enough. And I don’t go to food pantries when I don’t need the food. And when I do go I only take what I need cause I know people need [it more]. But I do see people hauling bags that are like twice the weight of them almost and I’m like “Wow!” And they’re big people. But that’s me judging.” (Sylvia, customer)

Additionally, it could help to create an environment in which customers do not speak to one another. This may help perpetuate the belief among customers that food insecurity is an individualized problem. The idea that poverty is “individualized” does not refer to a single-person household, but rather refers to the blame put on the actor of the household seeking food assistance. When I asked Leslie if she regularly talked to other customers when she came to the large pantry, she said:

“I don’t know if it’s also because they’re embarrassed because they’re here. I don’t know. Maybe every once in a while someone will say ‘I haven’t been here in a while so I’ll see what they got.’ Sometimes, there was a guy that used to live in our building and he moved and I saw him here I think the last time I was here I saw him. And um we just chit chat a bit you know. Never anybody like how you’re talking to me now.” (Leslie, customer)

Not only can the pantry experience be stigmatizing, but the food often is not enough to last an individual or household for an entire month. However, there are concerns with allowing customers to visit the same pantry multiple times per month. For instance, the large pantry worried whether they had the volunteer capacity. During the focus group, it became obvious that the need for more volunteers was not just a matter of moving people through the line, but also to

help protect against people that may otherwise overuse the system. During the focus group's conversation about being a "hand up or hand out," Lindsey mentioned her concerns at their current customer capacity: "And I, we worry about that, but. You know, we're all limited in how much staff we have, we're all limited in how much tracking down we can do. We barely have enough volunteers to hand out the food" (Lindsey, volunteer).

Another concern with allowing customers to visit more than once a month is with TEFAP food, which has restrictions that only allow customers to come once per month. When I asked the focus group about their pantry's filing system, Laura mentioned: "Joann spends a lot of time going through the [index] cards like cause she's the one who files [the paperwork], like makes sure they did a USDA form and she's the one I think that catches [customers] sometime[s] so she'll see same addresses or I just saw this name on another card" (Laura, volunteer). The larger pantry is unique in that it had an area in their pantry that was labeled "non-USDA" food, where people that didn't qualify under the income threshold could shop. The selection there was narrower, however, since TEFAP food is usually some of the more nutritious food at the pantries. Nonetheless, the large pantry is organized in a way that could allow customers to come more frequently without double serving TEFAP food.

The volunteers in the focus group mentioned that the lack of help meant that little policing could take place. However, the following discussion led to the idea that the truth would eventually come out by those that were being dishonest. To help reduce "abusers," the small and medium pantries require proof of local residency from customers, which they believe discourages customers from "doubling up."

"We don't really police, but one example is that we had a gentlemen who was coming and he had a Madrid address. Well were you know, I mean, Madrid is no big deal [for us to serve]. But we had people three times try to deliver a Christmas basket and they called

and he finally said “I don’t live there.” Okay, then you can’t come anymore. So, we don’t police but sometimes it [the truth] just comes out.” (Melissa, volunteer)

Volunteers from the small and medium pantries were adamant about serving only customers residing in their communities. This idea of controlling abusers by requiring residency came up a few times. However, the focus of serving local customers appeared to be less about capacity and more about appeasing donors. In relation to the focus group’s conversation about whether asking residence was important, Sue argued:

“And we know it [the food] will stay local. And there’s no, no middle man. They [donors] know that it stays right there. Because we have people that are not members of our church, you know community people, who are quite generous and businesses too. I don’t know that if it were known that we [served outsiders], I don’t know if that would make a difference.” (Sue, volunteer)

However, the larger pantry was clear about the fact that they did not restrict where people lived in order to go to their pantry. They said that they used to require Story County residency by their customers, but had since removed that requirement since the on-site clothing pantry did not have the residency restriction. Since they did not restrict residency, the large pantry mentioned serving customers who came from more than 20 miles away, in addition to serving customers from the two towns where the small and medium pantries are located. They mention that many of the customers traveling far distances are large families that visit the food and clothing pantry.

However, the small and medium pantry volunteers seemed to believe that by having a residence restriction, it would serve as another self-policing measure. “Our people talk to one another and they go where they don’t ask residence. You know they go. I guess if they find about you they might go there” (Sue, volunteer). This quote from Sue shows a clear disconnect since 61% of the customers at the small pantry are having to visit more than one pantry a month. By

not trying to understand why many of their customers seek multiple food assistance sources, they are much less likely to change their monthly restrictions and meet all of their customers' food needs.

Throughout the focus group, volunteers made a distinction between “deserving” and “undeserving” customers. Customers deemed “deserving” tended to be seniors, the disabled and children. One volunteer from the smaller pantry notes “...and especially to distribute to children. Who are really, all of our hearts go out to them you know, they should have food.” On the other hand, those without children, a visible handicap or those that otherwise look able-bodied may be judged as “undeserving.”

Interestingly, when I asked why the focus group participants liked volunteering at their pantry, the undertone of “undeserving” or untrustworthy customers was clear in Stacey’s response:

“I’ve learned to like the people. They are truly very, very down to earth. And some of them you just have to take with a grain of salt you know, if there telling you the truth or not but they’re all very personable. They would all, I believe, do anything for you if you ask them to. And in a way, they are so much better than the people that have it so much better. And personally, I feel better when I’m volunteering my time. It just makes me feel good.” (Stacey, volunteer)

Truthfulness, according to the volunteers, was a trait that not all of the customers were practicing. However, a few customers mentioned that the reason behind being untruthful (such as overstating their household size) was actually helping them get through the end of the month by getting more food at once.

In addition, the motivation to “feel good” about doing this type of work also poses a challenge to establishing more unity between customers and volunteers by creating a power differential. The pantry volunteers are motivated on the basis that one person (volunteer) is

helping another (customer) do something they can't do on their own. This may create the feeling that because the customers are "getting something for nothing" that they should be grateful for what they get. This is problematic in many ways, but one is that it disempowers customers, especially for those abiding by special dietary restrictions who feel they have little room to make requests about what they are getting from the pantry. "I don't make it [my dietary restrictions] a big deal cause then they're like 'well who the hell are you' you know. I don't know. I'm nobody special" (Steve, customer).

The customer's sentiment about not requesting specific foods was shared by a few of the customers. The pantry volunteers were seen as providing a service, so asking for more would be overstepping their boundaries as customers. Instead, the feeling of gratefulness often restricted the customers from speaking openly about the fact that they are not guaranteed food, a basic necessity for life. Instead, the pantry is seen as an organization that allows them to have food, which is better than going hungry. "We wished that we didn't have to go from place-to-place to have enough food for the month, but since there is places to go at least at least we're eating I mean, you know" (Lucy, customer).

The customer from the large pantry also mentioned that she went to several other pantries a week, plus a free meal program from time-to-time, which is offered every day. She and her husband, who are both retired, now have seven people living in their home. Their only income is her husband's disability and both of their social security checks, which added up to \$1200 a month. Lucy's gratitude for the food pantries was based on the fact that she felt the only choices were to eat or not eat. She was unable to offer ideas about programming that could help her and her family become self-sufficient, yet at the same time, she mentioned the difficulty of dealing with benefit cuts, which likely has led her to going to the pantries more often.

“We were getting two hundred and some dollars a month. They just kept knocking us down. Slowly but surely. And it got to 16 dollars and then, um, they messed up on his disability and that and so then then it went up to 53 after they got that all squared away.”
(Lucy, customer)

In many of the interviews, perhaps because I only spoke to those with limited incomes (those at or below the 185% poverty threshold needed to qualify for federal programs), customers spoke about how the combination of different assistance programs helped them survive month-to-month. When benefit levels were cut, customers described the aftermath. Almost all of the customers interviewed mentioned having their assistance being cutback. Interestingly, the lived experience of surviving with few resources was explained differently by men and women.

Themes: Gendered Experiences

In relation to federal programming, some customers thought that public assistance was better than private assistance; the trend seemed to be drawn across gender lines where men were more likely to mention strategies to become independent from the pantries specifically. Additionally, men brought up issues of pride and stigma in the emergency food system more frequently than the women.

Using gender as a lens, I could see a clear distinction between how women viewed the food pantries versus how men viewed them. This was likely due to their respective roles in the home as well as other factors. Women mentioned cooking for the family and their responsibility to make sure their family has what they need. Of the women I spoke with, only one was single with children. One other was single with no children, and the other three were married. In all cases, the women talked about their role in acquiring and preparing food.

Most all of the women mentioned instances of internalizing family stress or care taking. When I asked a Leslie, a customer from the large pantry, about any impacts the last ten years had on her or her husband, she immediately brought up getting sick and the affect that had. “And he always tells me that it [getting cancer] wasn’t your fault and that you can’t blame yourself for something you don’t have control over. But as women we do that all the time” (Leslie, customer). Leslie mentioned that she wishes she could contribute financially; however, she made no mention of the value of her own house work, which she said took most of her time during the day. In addition, some female customers talked about getting food specifically for their partners; “I let him [my partner] go with me [to my pantry]. Whenever he decides to come with me I let him” (Sylvia, customer). Sylvia mentioned that sometimes she goes to the pantry just to give the food to her partner. Most all of the women mentioned that going to the pantries was a matter of getting foods they know would go with what they already had, which I took to mean they were the sole person getting groceries. “We used up maybe half of it [food from the pantry] so far. Cause we kinda, when we get groceries we find something that mixes with what we already have. And going to the pantry I didn’t have to spend as much at the store” (Sarah, customer). I found that the women I spoke to were key in acquiring food from different sources to ensure that everyone in the family got fed.

One of the male customers from the small pantry, Steve, mentioned how he feels judged by the way he looks when he goes to the pantry. “Cause a lot of people look at me and they’re just like ‘pshh what do you need the help for why aren’t you working’” (Steve, customer). The experience by the small pantry customer is likely exacerbated by the small pantry volunteer’s aforementioned undertone towards “deserving” (children, seniors, and disabled) and “undeserving” (able-bodied unemployed adult) pantry customers. Steve was recently diagnosed

with heart failure. Though he was in his late twenties and looked seemingly healthy, he explained his past medical conditions and emergencies. He has been awaiting approval for disability for almost three years, and because of his conditions changing from day-to-day, he mentioned that in the past he has gone in for testing and has been denied because that day was a “good day” for him and so he did not have many symptoms. He mentions his insecurity with the way he looks and trying to receive assistance, and mentions that many people likely misjudge his situation.

Additionally, other males described trying to seek independence from the pantries in the long run. One customer and his wife were disqualified from SNAP because his wife got a second job, which made them exceed the income threshold.

“We understand that food stamps would go away. And yeah, that’s another reason we visit the food shelves quite a bit because we’ve got to fill that gap in there. Um, we’ve been working on trying to figure out ways to lower our expenses so we can have, you know, a couple hundred dollars for food and stuff like that. Because that’s what we’re, that’s we lost with food stamps, it’s been kind of a struggle lately. With the two car payments, and the rent, all the utilities and all that stuff. It can be, it’s quite a challenge.”
(Luke, customer)

All of the men interviewed mentioned seeking independence from the pantries but only Luke had dependent children in his home. This may have played into the idea that the others felt “undeserving” of food assistance because they may feel more societal pressure to be self-sustaining as single or child-less adult males.

Where men and women differed the most was in the type of assistance they found to be appropriate. While women were okay with going to the pantries, men were more likely to mention governmental assistance as a more appropriate or dignified way of getting supplemental food. As such, they were more interested in having adequate public benefits as opposed to private food assistance. “For me I think if I could get enough that I could buy my own food even

with the stamps, I'd prefer to go that way" (Matt, customer). This could be because men and women experience the food pantries differently. It could also be due to the fact that men are looked at differently by the volunteers (mostly female), and perhaps as less deserving. Also, public food assistance means greater choice in picking out food and possibly a more dignified experience than food pantries.

All of the men mentioned having to overcome "pride" prior to coming to the pantry. Some male interviewees talked about how more people need the pantry but feel the experience is too stigmatizing and would rather not let the neighbors know. "I used to feel a little bit bad about having to do it just cause of the pride thing but, after I learned that people only come here if they need it, pretty much that, well I deserve it too I guess" (Max, customer).

Max also talked about his parent's experience growing up, which likely contributed to the fact that it took Max a while before he felt "deserving" of the assistance he was receiving. He and his family grew up on a farm and often could have benefited from the local food pantry.

"Well my dad said that, uh, he didn't wanna have the neighbors and other people knowin' we go to the food pantry cause they might gossip about it. He said we're better than that we shouldn't have to go there when we have money in the savings. But that money is put away for when you need it." (Max, customer)

The stigma associated with going to the pantry affects many people, especially those that could benefit from food assistance but refuse to go to protect their dignity. Many of the men in my interviews mentioned that it took time to either come to the pantry or come to terms with receiving assistance. Additionally, pride and stigma came up more often from the small and medium pantries where the communities were more rural. I asked Mike what his least favorite part about going to that particular pantry was and he replied:

“I think the worst part is [that] in [a] small town like this [people] do let their pride get in the way and they really do need the help and have kids and are just surviving. And [then] they’re not able to put anything away towards savings or like maybe a college fund for their kids and stuff because they’re not utilizing what’s available to help.” (Mike, customer)

Though the importance of financial savings was brought up by men and women, the men interviewees talked about it much more often. As Steve explains, assets and savings can be a deterrent when trying to apply for federal assistance. Instead of encouraging capital accumulation, which is one of the most important measures to move people out of poverty, federal programming can require that a person have few assets or little savings to be eligible.

“Yeah, they’re [Department of Human Services] asking me to sell a motorcycle that my [deceased] dad gave me, you know, for graduating from school and my only form of transportation before I can get assistance... Why would you wanna get rid of all your stuff just to get help?” (Steve, customer)

This can be especially difficult for customers that have recently become poor. Life events—such as medical crises—can create a downward spiral of change for people, especially if their savings were already limited. The expectation to sell your assets and become impoverished before receiving help has proven to be a challenge for many, including the one customer that I interviewed that fell into overwhelming debt as a result of medical complications. In addition, nearly every customer talked about long-term medical costs—such as medication—which they often went without due to budget limits.

Themes: Medical Costs

The sentiment that going to pantries to meet food needs is not a desirable means of acquiring adequate nutrition was shared by all of the customers. Many noted that their least favorite part of the pantries were the wait times and the lack of choice for more nutritional

options. Often, the money saved by going to the pantries was going towards other expenses, such as medical care.

“Well we had to make a choice that day [after our car broke down]. Either leave your car settled on the side of the road or you swap money out that you were going to use to get your medicine to get some gas in the car and then do without your medicine and that’s what we had to do.” (Matt, customer)

Many interviewees mentioned making choices between basic necessities, things like food, medicine, rent, utilities, and gasoline. This is a major concern because most interviewees faced some kind of medical problem, ranging from cervical cancer to diabetes to heart failure, conditions which had led to them becoming food insecure in the first place. Volunteers were also concerned with their customers’ facing high medical costs, though they were more focused on those that did not have medical insurance. However, the divergence was when the volunteers did not make the connection between medical disability and inability to work. The volunteers’ focus, instead, was more on the immediate medical bill costs. “I think the medical bills, healthcare bills just if they’ve had issues. They can’t recover financially” (Sue, volunteer). Not only can the customers not recover, but now they are also burdened with the fact that they cannot return to their jobs, which often required long hours (truck driver), standing for long periods of time (Certified Nurse Assistant, cleaning services, and cook), or using their bodies (auto mechanic).

Additionally, mental health was mentioned by a few customers as contributing to their difficulty in obtaining enough food for themselves. Specifically, two customers discussed their struggle with anxiety and sleeplessness. Each had conditions that went untreated or misdiagnosed for years.

“I got depressed and developed mental illness in my senior year of high school and I received medication, um. But it was just for depression because that’s what they thought I

had. But they found out later, a lot later, that I was bipolar that's why I did something really stupid. I tried to um, park in front of a train and I was hit by the train." (Sylvia, customer)

"Five years prior to this I developed anxiety and panic attacks and it was terrible. I thought I was going crazy cause I didn't know how to control it...Course at that same time I quit using, I quit drinking. You know, living a whole new lifestyle and taking the medication. I don't have that problem [panic attacks] today" (Mike, customer)

Both Mike and Sylvia were affected by mental health complications at some point in their lifetime. Sylvia's mental health conditions have actually resulted in a lifetime of part time work. Following her sustained injury and recovery, she noted that now going to work twelve hours a week at the local library is exhausting. At the time of Sylvia's accident, she was 18 and still covered under her parents insurance. However, had this happened later in her lifetime, or had she not had parents able to support her, this could have led to extremely high medical bills. In addition, she may never be able to work full time and earn enough to be self-sufficient.

Mike described his past struggles with addiction and later, mental health issues. He associates the two and says that he is thankful for the local mental health institute for diagnosing and offering medications for his condition. In addition, he found spiritual and social support that helped him overcome his addiction. The issue of addiction was also brought into the conversation when Lindsey, a volunteer, asked: "I'm just curious, so many of our people that look the most desperate, have physical, or mental, or chemical, challenges. Do you guys find that?" Many of the other pantry volunteers agreed that some of the most desperate looking customers seemed to have a challenge or addiction of some sort. However, no one mentioned further services for customers with these challenges. Without the mental and social support that Mike had, he may not have been where he was today.

Sometimes the medical conditions of the customers led to a drastic change in lifestyles, such as the case with Leslie. She mentioned that now she feels guilty for not finding a job and contributing monetarily, but knows that she would not feel well enough to work every day. “I always felt like if I hadn’t gotten sick that I would be working to help, help my husband pay the bills and do those kinds of things. Like other, you know, married couples do” (Leslie, customer).

Not only can the medical bills be stifling, but the long-term effect of being sick can result in a loss of employment. “I brought home a thousand dollars a week. I went from that to nothing when I had my heart attack and couldn’t continue to work” (Matt). When speaking with Matt, I asked about his medical insurance in Iowa as compared to when he lived in Missouri. He mentioned that a lot of his debt today was due to his expensive medical care while living in Missouri.

“I had to pay so much out of my pocket each month for their [Missouri’s state] medical card to kick in. I had to spend \$750 a month...and we still got places suing [calling] us for medical bills [today] and we can’t afford to pay ‘em. I got a physical therapy over there in Boone over there. I owe him about 70 bucks and I can’t afford to pay it so his billing company finally turned me into a collection agency.” (Matt, customer)

The stress that Matt and his wife Marcie were going through was exacerbated by the fact they both were disabled by either a car accident (Marcie) or had experienced a severe heart attack (Matt) in the past. And though Matt was a recent veteran, he mentioned that the VA was not helpful in providing medical care, and that his medical benefits had actually been taken away from him after the VA claimed that he had missed paperwork.

Matt and Marcie’s long-term conditions have led them to become food insecure. Thus, to make ends meet with their limited budget, they have to go to the food pantries in order to have

enough money for other costs. They also mentioned that one of them would have to forgo their medication so the other could pay for theirs. Marcie and Matt, like many customers, are faced with long-term food insecurity and have been seeking help from the pantry for several years.

The long-term conditions that customers face because of health problems were not well understood by the volunteers. Some would talk about not being able to recover financially because of medical bills, but others remained skeptical of what conditions could cause people to be disabled or have health issues but still be able to go to several food pantries in a month. When asked what percentage of the customers coming to the three food pantries worked, Sue replied:

“I’d say most don’t have much income. Then they have health issues. On the other hand, when you say going to four pantries when you look at the time it takes, sometimes I think that is just, um, an occupation in itself. We see we see people gathering outside talking about where they can go and what they have.” (Sue, volunteer)

Sue seemed to be skeptical about customers with little income but yet were able to go to many pantries. Her point was that if a customer has the ability to go to several food pantries, then they should be able to get a job. Sue also seemed to question the motive of customers receiving governmental assistance, such as the customers on welfare, who do not work.

Though rural pantry volunteers spoke frequently about the customers that seem to be abusing the system, the large urban pantry volunteers did not appear to be as skeptical of their customers’ motivations for going to the food pantries.

“I mean would you want to sit an hour and fifteen minutes? I mean sometimes the wait is every bit that long, um, to get a maximum of 40 pounds of groceries is 2 sacks. Probably half of which isn’t what you would choose if you would go to a grocery store and buy. I mean these aren’t ideal conditions.” (Lindsey, volunteer)

One of the major differences between Lindsey and the other volunteers from the rural pantry were in their motivations for volunteering. While Lindsey noted that her “motivation is

religious” and she is doing it for social justice reasons, the rural pantry volunteers often mentioned other motivations, like “it makes me feel good” (Stacey); or “I’m doing something within my control” (Sue); or “the food pantry is a way of giving back locally to, you know, the people that in our community that need it rather than the whole county” (Melissa).

Themes: Temporary Approach to a Chronic Problem

Interestingly, the tone of the focus group changed halfway through as the discussion shifted to reasons why some people end up needing food assistance. In the conversation that followed, the volunteers focused their comments on the larger picture of poverty.

“Again it’s like they said, they’re minimum wage, and they have few enough hours so there’s no mandate to give any kind of benefits. And I mean times are tough! I mean, we get people in that have had gall bladder surgery for instance, or kidney stones. And no work no pay.” (Lindsey, volunteer)

Most of the volunteers connected their own experiences with customers at the food pantry to their ideas about why people come to need assistance. However, some of the reasons cited for people visiting the pantry, though broader, tended to focus on temporary setbacks, such as “gall bladder surgery,” rather than long-term health problems, like cancer or disability, which can create long-term need from the same people. This is troubling given that 42% of customer respondents reported going to more than one pantry a month and 58% reported going to their respective pantries six or more times a month. This indicates that the problem is not temporary but chronic for about half of all pantry customers.

In addition to not acknowledging the long-term needs of many pantry customers, there was also a discussion about customers that go to more than one pantry a month. Given that a large percentage of customers visiting the small and medium pantries visit more than one pantry a month, the goal of trying to stop multiple visits is worrisome from a food security point of

view. When asked about customers traveling far distances to get to pantries to avoid the potential embarrassment of seeing someone they knew, they responded:

Stacey: “I just would see more of the, they’re are just going to as many food pantries as they can possibly get to... Doubling up.”

Melissa: “And “that’s what the [United Way] collaboration has helped [with]...not doubling up”

(Stacey, volunteer and Melissa, volunteer)

Acknowledging that food insecurity is not just a matter of short-term food inadequacy is important to serving the long-term needs of customers in Story County. One of the volunteers from the large pantry was well aware of the big picture issue the community is facing. “Yeah, [but] what’s the cause of poverty? That would be the root cause [of food insecurity] and there are many things” (Lindsey, volunteer). At the same time, volunteers suggested their pantries were ill-equipped to address the root causes of poverty and food insecurity, especially given the complexity of the problem and lack of consensus about how to fix it.

The conversation also addressed challenges to keeping food pantries running. The large pantry volunteers explained that they had a volunteer staff of 75 people, while the medium pantry reported 20-25 volunteers, and the small between two and four volunteers. The large pantry, however, is open 10 hours a week, whereas the other two are open only one hour each week. The lack of volunteers may put a larger strain on the small pantry as compared to the others. In one conversation, Stacey (volunteer) said “I don’t see us disappearing because there’s always going to be someone. But whether or not you have people supplying it is the question.”

The pragmatic challenges of keeping any pantry going is a true challenge, especially for rural pantries who often have more difficulty finding volunteers. All too often the causes of people seeking assistance from food pantries, such as a cut in SNAP benefits, feels beyond the

control of many of the pantries. When I asked whether the volunteers felt their organizations should be involved in political issues like protecting public food assistance, Lindsey responded:

“We have people that go to the, uh, our congress people, both state and national. Um, we write. It feels like you’re doing nothing but you know, we try. We certainly try to get the congregational members to write when SNAP is being cut yet again.” (Lindsey, volunteer)

The sentiment was shared by all three pantries about the inability to control what happens at the policy level. Even the two smaller pantries noted that they did little policy work. Instead the focus was more on their own pantries and the short-term effects they were seeing as a result of dealing with the government.

“We aren’t very political that way, but our numbers are small. And conversely, we look at things like the civil rights act and filling out forms as just very cumbersome you know and yet I know. So whenever you have the government involved you have more regulations. Same with dealing with the food bank.” (Sue, volunteer)

The focus of the volunteers at the small pantry was largely pragmatic: getting food to people in need. Thus, dealing with bureaucratic entities was one more barrier to streamlining their process. The threat of not having enough volunteers for rural pantries is also a concern because many of the people interviewed from rural areas specifically cited access to resources as a struggle. With less volunteers to keep the pantry running, it is difficult for the small pantry to consider “extra” activities such as encouraging customers to sign up for federal food assistance.

Conclusion

This research highlights many of the gaps in the customers lived experiences versus the volunteers’ perceptions. This gap in understanding is problematic in many ways, including the fact that volunteers—without knowing the background of their customers—are often ill equipped

to offer assistance with accessing federal programs or other private assistance. This may translate into more stress for customers that would otherwise benefit from additional assistance.

However, because poverty issues are largely individual problems in the US, there are many issues with getting to know one's own food pantry customers. Food pantries face a double edged sword: not asking questions is seen as more dignified, but means that volunteers lack knowledge about their customer base. Thus, the cycle of temporary food pantry assistance, and the associated stereotypes, continues to perpetuate dependence on the emergency food system. To discuss these gaps more thoroughly, the themes above will be discussed in detail as they relate to the existing literature.

CHAPTER 5. DISCUSSION

To summarize some of the findings from this thesis research, I will discuss the major themes in relation to the literature and then return back to my original research questions. From the three main research questions, I wanted to learn about the conditions of the customers coming and their depth of need (survey); to understand how customers rationalize receiving public and private food assistance and what life changes had occurred to bring them to pantries (in-depth interviews); and to understand how pantry volunteers perceive people seeking multiple forms of food assistance, and whether there was a difference between volunteers in urban and rural pantries (focus group).

Othering

Othering is seeing and treating someone different from than oneself. In the context of the research, I found three forms of othering: between customers, between the rural and urban pantries, and between volunteers and customers. Returning to the idea of Habermas's (1985) fragmented consciousness, othering between customers and between volunteers and customers is just another barrier to achieving collective action around the root causes of food insecurity.

The first instance of othering occurred between customers. In a study on othering in the context of poverty, Chase and Walker (2013) found that "while participants desperately wanted to distance themselves from the archetypal benefit claimant portrayed through the media, they often identified others who they felt fed such stereotypes and hence became critical of others" (p. 749). Mike, a customer, typified this: "Like I say there's different types of people and some of 'em take advantage of it and some of 'em don't." Mike separated himself from the non-abusers by pointing out that he doesn't abuse pantries but others do. The abusers were described with words like "taking advantage", "lying", and "abusing." As Chase and Walker (2013) argue, this

is an effort by the customers to reduce their own shame in the situation; shame has been an increasing focus of research in the area of poverty, including how shame causes people to distance themselves or defend themselves against others. Mike's mention of "abusers" was not unique in this research. This helped create a rhetoric around people "taking advantage" of pantries, which formed a social stratification among customers. Additionally, the effect of customers avoiding shame by bringing up examples of other "abusers" perpetuates the idea that food insecurity and poverty are individualized problems rather than systemic, which further reduces a customer's agency in the situation.

In the second instance, the three volunteers from the rural pantry seemed to pick out differences between themselves and the urban pantry. Whether this was because the rural volunteers were at least somewhat familiar with each other, or there was a different tension related to the urban and rural divide is unknown. However, there were specific instances where the rural pantries would talk about how the urban pantry was different, and sometimes even in a negative tone. "Our people talk to one another and they go where they don't ask residence. You know they go. I guess if they find about you (large pantry) they might go there" (Sue, volunteer). The small pantry volunteers were some of the most adamant about serving local customers. Sue, the small pantry volunteer, spoke to the large pantry volunteers as "others" by talking to them as an outsider from the rural pantry perspective or way of doing things. Lindsey, a large pantry volunteer, was outspoken about her views, which were often opposed to those of the rural pantries. "I mean would you want to sit an hour and fifteen minutes? ... These aren't ideal conditions." The group was silent for a bit after Lindsey's comment. Lindsey was outspoken and would have been considered a nonconformist in the group. I found that Lindsey and Lucy were both seen as nonconformists, which reflects the idea that "social groups often penalize

individuals who deviate from accepted norms, even when deviations are relatively minor” (Bernheim, p. 842, 1994).

The final instance of othering was between pantry volunteers and customers. This instance was obvious by volunteers’ use of pronouns to generalize users. “But they’ll [customers] stand right outside the door and wait for the food pantry, so it’s not that they want to be seen there [the pantry], because they are seen there” (Melissa, volunteer). This was a conversation in which Melissa was having with the volunteer group about how customers will not go to the congregational meals, but will still come to the pantries. The pantry volunteers were not only perpetuating the rhetoric of “beggars can’t be choosers,” but they were also talking about the customers in a generalized way. From the volunteer perspective, they were generalizing all experiences of food assistance as stigmatizing. However, from the customer point of view, it could be that going to the pantry and actively making the food versus going to a congregational meal where food is already prepared, could carry different levels of stigma. So though the volunteers saw the meal and pantry as one in the same and were asking why “they” [customers] wouldn’t go, the customers themselves likely felt much differently about the meals. When I asked one customer about whether he had gone to the meals, he said, “Well nobody’s ever invited us to it. And a lot of times with eating away depends upon how something was fixed as to whether I can eat it or not because I’ve got a couple of things that I’m allergic to food-wise” (Matt, customer). Matt has to be careful where he eats out since he has a common food allergy, which would make congregational meals more of a risk for him.

Wolfe, Frongillo, & Valois (2003) found that a continuum of socially acceptable ways to acquire food, with asking others for food/meals and borrowing money for food as less acceptable, and using a food pantry and buying food with credit as more acceptable. Though the

congregational meals were donation-only, customers may have been embarrassed to eat without donating. Additionally, the meals are housed at nearby churches, which may be perceived by customers as a church-related event and thus exclusionary. Though the three pantries are located at or near a church, they are considered to be a community food pantries. Thus, they do not promote the church-related activities to their customers (other than the meals) in any way.

Stress and Pantry as Survival

Customers all mentioned “survival” when discussing their food pantry usage and inability to afford basic necessities. The psychological reaction of stress from chronic food insecurity has been well studied in recent years (Hamelin et al., 2010, Whitaker, Phillips & Orzol, 2006, Jones & Frongillo, 2006). In this case, stress was mentioned as a side effect of a household’s inability to obtain all of their needs. Additionally, flexible expenses—such as gas and food—were mentioned as being able to be sacrificed in order to cope with limited budgets. The food pantries may be the difference for some individuals of having food or not having food.

Stress can be defined as a process involving “exposure, resistance, and outcome” (Whiting & Ward, p. 490, 2010). Whiting et al. further go on to identify sources of stress, including “life events and changes, chronic strains, and daily hassles” (p. 491, 2010). The “chronic strains” in this case is long-term food inadequacy, which is worse than just food insecurity. Stretching food or skipping meals may induce “chronic strains,” which have grave consequences in terms of physical and mental health. Throughout this research, I came in contact with a few people that I believe experienced food insufficiency and admitted to skipping meals. For instance, Matt, a customer from the medium pantry, talked about how many people in his community, including himself, had to constantly make hard choices: “A lot of times people have to choose between eating or getting medical treatment.”

All of the customers I spoke with mentioned coping strategies for obtaining enough food on a limited budget. This in part alleviated some of the stress of having no food (“chronic strains”) and instead put the stress on the individual to find and utilize other resources. In the surveys alone, customers mentioned 11 different food assistance sources throughout the county, which suggests coping strategies similar to what other researchers have found. “Studies examining household food provisioning typically show that households at risk for food insecurity participate in a myriad of food acquisition practices” (Whiting, et al., p. 491, 2010). Mike, a customer from the medium pantry, noted that scoping out resources is part of what it means to survive; “I mean because there’s a survival trait is searching out and finding out what your resources [social services] could be.”

Moreover, there can be different levels of stress based how a person in need of food acquires it and whether that matches or goes against their social norms (Whiting, et al., 2010). “I mean the first response [if I ran out of food] I would ask is family. If family couldn’t help I would go to other places because I know there’s other people hurting more than I am so I feel bad taking from them” (Sarah, customer). Sarah mentions that she finds it most appropriate to ask family for food before all else. When asked about her feelings towards getting food assistance, Sarah became very emotional and said that she felt guilty, ashamed, and that she was taking away from others that really need it. Sarah’s feelings about receiving assistance and the shame from acquiring food from pantries added to her stress. Additionally, Sarah mentioned several times that her mom was able to raise five children as a single mother, work two jobs, and still put food on the table without relying on the state. This could be part of the reason why Sarah feels that going to the food pantry and receiving public assistance is a less appropriate way of acquiring food. Whiting et al. (2010) points out that in a tribal community, the most stress stems

from those receiving food assistance such as SNAP. The stress comes from food benefits not lasting the entire month, and the difficulty of getting to a grocery store (Whiting et al, 2010). Almost all of the customers in this study mentioned inadequate benefits and lack of transportation as hurdles to acquiring enough food.

However, heightened knowledge of public assistance programming could help alleviate some of the stress from limited income. For example, some customers asked if their assistance would end, perhaps inducing stress from being unsure about the future of some of their income sources. “When you get on Medicare do they take you away Medicaid? You know, stuff like that. Is state gonna stop helping once federal government starts helping” (Sylvia, customer)? Kissane (2006) found that non-profit directors in the anti-hunger field were not as knowledgeable about welfare reform as they could be, which could hinder their abilities to offer resource advice to customers. “The knowledge that nonprofit directors possess may affect their ability to help clients navigate through the current welfare system and to advocate for clients within the system” (Kissane, p. 323, 2006). Knowledge of policy changes, such as welfare-to-work, should be knowledge that all nonprofits serving the poor have (Kissane, 2003). It is evident that the gap between customers and volunteers in this research could serve as a barrier when it comes to volunteers acting as resources for customers because the conversation around other types of assistance available is not happening at the pantries.

Policing Against Abusers

It is clear that the food pantry volunteers and customers live very different livelihoods. This difference has affected the volunteers’ ability to truly understand what it means to be food insecure. As such, the realities of the volunteers is different from the customers; where the volunteers believe that food pantries are an ample resource that must be protected against

overuse, the customers believe the pantries are a resource for them to utilize to survive. As such, this difference in reality between the two constituents is best exemplified in the volunteers' discussion about how steps need to be taken to reduce food pantry abuse. The volunteers are focusing on individual-level needs rather than taking a step back and seeing the social and economic inequality that perpetuates the issue (Washington, 2008).

A lot of people today believe that welfare and governmental nutrition programs are being abused by individuals as a way to “get something for nothing.” In fact, in 2013, a Pew research poll showed that 44% of Americans believed the poor had it easy because they could get government benefits without doing anything in return (Pew Research, 2014). Miller (2000) notes that a majority of whites believe most welfare recipients are black, even though the lion share are actually white. This suggests that at least some of the support among whites for cutting public programming could be more of an issue of racism rather than budget concerns. This animosity has changed the conversation from how to alleviate poverty and inequality to talking about ways to reduce welfare rolls (Handler & Hasenfeld, 2006).

The SNAP to Health website, which is a source of information regarding SNAP, notes that since the program's beginning, it has consistently been a target for accusations of fraud and misuse (Snap to health, 2013). SNAP currently reports a 96.16% payment accuracy rate, meaning that the instances of user fraud are lower than ever (Snap to Health, 2013). Regardless of these facts, speculation about abusers of “the system,” in this case the network of public or private food assistance, was perpetuated in the focus group conversation with volunteers.

In this research, volunteers and customers continuously spoke of abusers of the system. However, customers used the term “abuse” differently from volunteers, in that they were pointing out other abusers of the system as a way to avoid shame (Whiting et al., 2010). On the

other hand, volunteers, particularly those from the rural pantries, were more likely to talk about perceptions of abuse. This may be a result the rural context, where local values may be more conservative than in urban areas (Kron, 2012). This political context may foster a negative perception of governmental assistance that helps “undeserving” people, some of who may be using the pantries. “Previous research in a wide variety of public domains has indicated that under no scarcity, liberals tend to help all claimants for assistance, whereas conservatives withhold assistance from people who are personally responsible for their predicaments” (Skitka & Tetlock, p. 491, 1992). The idea individuals being “personally responsible for their predicaments” is problematic because it perpetuates poverty as an issue of personal agency, even though poverty in the U.S. is systemic. As Langston points out, some people are born with “a silver shoe horn” while others, such as the disabled, communities of color, female-headed households, elderly, and children are disproportionately in poverty in America (1995). In an effort to combat poverty, one must first realize that “working hard” as a solution to the problem is unproductive because not all people start life on an equal playing field.

Explanations for pantry volunteers’ perceptions that their customers are abusing the system has been researched by Edlefsen and Olson, who sought to reconstruct how food pantry volunteers understand hunger and its root causes. They found that in the volunteers’ effort to understand their customers’ experiences, they referenced popular beliefs around welfare and fostering dependency. “One of the ways they [volunteers] explained clients’ lack of employment was by concluding that the receipt of aid (public and charitable) produced dependence and reduced the desire to work among recipients” (Edlefsen et al., p. 97, 2002). Edlefsen et al. conclude that the beliefs and understandings held by food pantry volunteers were no different than that of the general public (2002).

The literature related to the experiences of volunteers and staff working with emergency food organizations is split. Curtis (1997), like Edlefsen et al., found that the food pantry volunteers' experience at emergency feeding programs can help reinforce class-based stereotypes for the poor. Reingold & Liu spoke with directors of social service agencies and found that they had a similar individualized view of poverty as the general public (2009). On the other hand, Poppendieck (1997) found that volunteers at emergency feeding programs were able to utilize the experience as a way to learn and become more aware of the problems, consequences, and causes of hunger in their communities.

Volunteer attitudes towards “policing against abusers” and encouraging self-policing also creates a sense of powerlessness among users. In this context, powerlessness appears in the lack of choice or say in the food items available to customers (Stein, 1989). Even though the food pantries in this case do allow customers to choose which items they will take, that does not mean that they have free choice. For example, the food supply at the pantry could be considered culturally inappropriate or nutritionally insufficient by some customers (Poppendieck, 1997). Throughout this research, I found many people had food preferences related to allergies, culture, or health restrictions. But in all cases, they felt as if they had to take what they could get and could only control where they went, not what they received. “I don’t make it [my dietary restrictions] a big deal cause then they’re like “well who the hell are you” you know. I don’t know. I’m nobody special” (Steve, customer). Stein (1989) helps explain why customers, like Steve, feel as if they should not complain about what is being given to them; “If a product or a service is to be given, the terms of exchange shift from monetary to emotional; gratitude becomes an acceptable currency” (p. 246).

Volunteers' motivations for giving their time at the food pantry may be relevant in the discussion of powerlessness and abuse. The differences between volunteers at the urban pantry versus the rural pantries were clear. While Lindsey from the urban pantry notes her motivations are religious and related to social justice, Sue, from the rural pantry, notes that she likes the people, likes that working at the pantry is something within her control, and likes seeing a direct result of her effort. Stein (1989) found that for volunteers doing a service "for themselves" were usually the ones that expected gratitude for their service: "volunteers felt 'ripped off' if customers who chose to respond did so with complaints. The expected return on sympathy is gratitude" (Stein, p. 246, 1989). In other words, Stein found that volunteers that were motivated by doing the service "for themselves" believe that their work is service, whereas the people motivated by spiritual or political reasons could view this type of work as providing people with their *right* to food (1989). This difference of motivations among volunteers—food assistance as a service versus as a right—could help explain the difference between the urban and rural pantry viewpoints when it comes to food assistance. The rural pantry volunteers were motivated by some aspect of doing something that was in their control and was local. This is, in a sense, fostering paternalistic power—I am helping you do something you can't do by yourself—with the payback being in the form of customer gratitude. This puts the customers on a different level from the volunteers and acts as a barrier for getting to know each other. In addition, customers that ask for more or different items than what is available at the pantry could be seen as being ungrateful. This may also feed into the "abuser" mentality—that users are not "paying" for the service they receive with sufficient gratitude. As Stein (1989) suggests,

"Poverty and disenfranchisement often are taken to mean the cancellation of any right to complaints or other expressions of attitude. This is true particularly when an individual is perceived as complaining in the face of charity, or as taking advantage of it" (p. 248).

If food assistance was seen more as a right than a service, then perhaps restrictions, such as limits on the number of visits per month, and constructive dialogue between customers and volunteers about the type of food in the pantry could occur without accusations of ingratitude. Additionally, by viewing food as a right, other changes that distort power relations and trust between customers and volunteers might occur. These include reducing the physical barriers prevalent at many pantries, such as having clients wait outside until the pantry opens and having separate waiting rooms for customers and volunteers, which perpetuate distrust and disempowerment (Curtis, 1995).

Gendered Stereotypes

Many of the customer respondents were female, and many of the people I observed while visiting the pantry were female. Based on these observations, I suspect that my interviewee sample included a disproportionate ratio of males to females, which was 5:5 since one of the husband's sat in on an interview. However, the even number of males to females allowed me to view their different stories from a gender perspective. Also, in focusing on gender within critical theory, one can begin to critically view, for instance, the impediments causing women to disproportionately come to the pantry. Without understanding this, it would be impossible to address and change the social and structural arrangements that are to blame.

Much of the literature contends that the burden of being food insecure ends up putting a disproportionate amount of pressure on females (e.g. Cawthorne, 2008). "Where better off people substitute money for time through purchase of labor-saving goods or services of others, those in poverty often do the opposite" (Payne, 1991, Lister, 2004). Often times, women are the ones that are left to do this work and receive little appreciation for having done this work (Lister, 2004). I found this to be the case in many of my interviews with women. The chores of grocery shopping, cooking, and cleaning was often left to them. A few of the women were also care

givers for either their partners or young children in their home. Women caregivers have been researched widely in the context of food insecure families and has been shown to be a stressor to women and their children's health (Whitaker et al., 2006; Jones & Frongillo, 2006). The upsurge in female-headed households at risk to becoming impoverished has been termed "feminization of poverty" (Lister, 2004). This is not to say that women have not always disproportionately experienced poverty, but that there has been a significant increase in the proportion of women in poverty in recent years.

While the women I had interviewed spoke about going to the pantries in order to have enough food, many of the men that I had interviewed talked about gaining independence from the pantries and the loss of pride that happened when receiving assistance. "I think the worst part is [that] in [a] small town like this [people] do let their pride get in the way and they really do need the help" (Mike, customer). Mike mentioned "pride" frequently throughout the interview. His concern, like another customer named Max, was that many more families needed food assistance but the males in the household refused in order to protect their pride. "Well my dad said that, uh, he didn't wanna have the neighbors and other people knowin' we go to the food pantry cause they might gossip about it" (Max, customer).

Though female interviewees were also faced issues of stigma and pride, they emphasized these issues less. This may have been because four out of the five men were from rural areas, where pride might be seen as a bigger barrier. However, though male stigma was prevalent in this project, other research has pointed to themes of pride, stigma and finding alternatives to seeking private food assistance as common to both men and women. In a study by Wolfe, Frongillo, & Valois, they found these themes common to both elderly men and women.

"Knowing and perceiving their [elderly men and women's] lack of food choice and the need to make compromises leads to feelings of deprivation, anger and

embarrassment...Others were angry at having worked so hard all their lives and finding themselves in a difficult food situation, embarrassed about going to food pantries to get food and too proud to ask for help” (2003).

As mentioned, four of the males interviewed were from rural areas, while only one was from an urban area. By contrast, two of the urban interviewees were female, which means three out of the five women were rural. Previous research has identified differing effects of poverty on urban and rural communities. “Within a small, tightly-knit rural community, the choices that the poor make influence not only their material survival, but also their community standing through the creation or diminution of ‘moral capital,’ a form of symbolic capital based on perceived moral worth” (Sherman, pp. 891-892, 2006). This “moral capital” is said to be exchangeable with economic capital, and therefore someone with low moral worth could “lack access to the community's increasingly rare jobs, as well as too many forms of community-level charity” (Sherman, p. 893, 2006). This idea of moral worth in small towns was evident in Story County, especially for the men who were out of work.

One reason that men may have felt more stigmatized is the conflicted notions of “deserving” and “undeserving” poor. One researcher, Will (1993), conducted a factorial survey to understand whether characteristics of people receiving social welfare programming influenced survey respondents’, from the 1986 General Social Survey, generosity in terms of monthly assistance benefit levels. Will found that respondents were more generous toward households with several children, households where the father is disabled, or if an individual were temporarily unemployed. On the other hand, respondents punished or took away benefits from characters that were not actively looking for employment (Will, 1993). This aligns with recent public polls showing that 83% of Americans polled favor work requirements for welfare

(Rasmussen Reports, 2012). Since all of the men from the rural area were out of work, this could have contributed to them reporting feels of being “undeserving” of assistance.

The main reasons the four men interviewees were out of work was because of either occupational injury (2), heart attack (1), or heart failure (1). All of the interviewees had faced major medical costs due to illness, along with a loss of employment. In the case of Matt and Marcie, this led to medical bankruptcy.

Medical Costs

Medical debt is arguably the leading cause of personal bankruptcy in the US. According to a study conducted by NerdWallet, a private company that offers financial education and research, one in five American adults struggled to pay medical bills in 2013. The study noted that it is not just those that are uninsured; even the insured often end up with substantial out of pocket expenses when a family member gets an unexpected illness. LaMontagne (2013) states that even with expanded insurance coverage, 10 million Americans were expected to face medical bills they could not afford to pay in 2013.

Moreover, people that are food insecure are more likely to have medical problems, such as diabetes, hypertension, and cardiovascular disease (Hamelin et al., 1999; Seligman et al., 2007; Slack et al., 2005). This is exemplified by the fact that from 1999–2004, households that were considered food insecure had a prevalence of diabetes of 10.2 %, whereas food secure households had a prevalence of just 7.4 % (Seligman, Laraia & Kushel, 2010). This has implications for food pantries because if they are only allowing their customers to visit once per month and the need is greater, this could cause customers to choose between medication and food. In a study relating food insecure households and diabetes management, the authors found that practices, such as maintaining proper and consistent calorie intake and consuming nutrient-

rich foods, were much less prevalent in food insecure than food secure households (Seligman, Davis, Schillinger & Wolf, 2010). This makes food insecure households less able to self-manage their diabetes, which ultimately leads to greater medical complications, especially later in life.

Medical costs are some of the greatest concerns for those facing poverty and one common cause for pushing households into poverty. In this project, six out of nine interviewees were insured, or were insured at the time of a medical problem. Those that were uninsured talked about the cost of getting insured, even with the Affordable Care Act. Of nine individuals, all but one mentioned past medical problems and related costs. Even those that were insured reported struggling to afford frequent co-pays and prescription costs, which led them to face choices between medical needs and other basic needs like food and transportation costs.

Medical bankruptcy is a difficult issue for Americans between the ages of 35 and 54; this was also the predominant age group of customer respondents and interviewees for this project. For Americans age 35-44, medical bankruptcies account for 28.9% of total bankruptcies, and 26.4% for ages 45-54 (NerdWallet.com).

However, it is important to note the findings from Dranove and Millenson who claim that there are flaws in the way “medical bankruptcy” is counted, which currently includes anyone with medical bills exceeding \$1,000 in two consecutive years prior to filing for bankruptcy (2006). They suggest that medical problems are sometimes just one additional cost leading towards bankruptcy, but possibly not the sole cause. Dranove et al. (2006) counter the claims made by Himmelstein, Thorne, Warren & Woolhandler (2005) who argue 54.5% of bankruptcies in their study were medical bankruptcies. Using the same data, Dranove et al. conclude 17%, as opposed to 54.5%, of all personal bankruptcies have a causal link to medical costs (2006). Nonetheless, though, they both note that the average household income of those filing for

medical bankruptcy is around \$25,000, suggesting that high medical costs have a greater impact on those households in the middle to lower class (Dranove et al., 2006; Himmelstein et al., 2005).

Matt and his wife Marcie mentioned their trouble with collection agencies calling Matt about past medical debt. In addition, I was under the impression that although Matt and Marcie may be technically under water and would be eligible to for file personal bankruptcy, they had not yet. One reason may have been the passage of the Bankruptcy Abuse Prevention and Consumer Protection Act (BAPCPA) in 2005, which has made it more expensive and difficult to file for personal bankruptcy. Matt and Marcie are now receiving Supplemental Security Income (SSI), which provides modest income support to individuals with significant disabilities and few assets. In order to qualify for SSI, Matt and Marcie had to reduce their assets down to \$2,000. That led to Marcie and Matt giving up their home and moving to a trailer to could qualify for SSI.

Matt and Marcie are a clear example of how medical disabilities can push individuals into poverty and food insecurity. Additionally, organizations such as TalkPoverty.org—a project of the Center for American Progress which seeks to alleviate and reduce poverty—say that the asset ceiling of \$2,000 for SSI does not match inflation rates. If the program had been indexed to inflation, they say it would be more than \$8,500 today (TalkPoverty.org). This illustrates that the current approach to providing modest SSI income support to those with disabilities requires that one must first lose all of their assets.

“Double whammy”

A related question is whether the medical problems faced by eight of the nine interviewees led to a long-term disability, which the ADA defines as “a physical or mental impairment that substantially limits one or more major life activities” (ADA, 2009). A significant number of interviewees reported major medical issues that inhibited them from returning to their previous work, which exacerbates the problems of medical debt. This is what Sugden (2012) refers to as the “double whammy,” when high medical costs and reduced income occur together (p. 466).

Out-of-pocket medical expenses can be overwhelming for individuals earning poverty level wages. As the cost of medical care has increased faster than inflation, medical costs have become debilitating for many lower and middle class households. According to Cubanski, Swoope, Damico, & Neuman (2014) “Between 2000 and 2010, average total out-of-pocket spending among beneficiaries in traditional Medicare increased from \$3,293 to \$4,734, a 44% increase” (p. 19). According to Sugden (2012), even the out-of-pocket ceiling under the Affordable Care Act will be insufficient to protect most low and middle-income families. For 2015, the maximum out-of-pocket expense for an individual is \$6,600 and \$13,200 for a family plan (HealthCare.gov, 2015).

Even for those that are insured, this could mean being forced to pay out-of-pocket medical expenses (such as meeting a high deductible) while being out of work temporarily or permanently. “I had to pay so much out of my pocket each month to be for their [Missouri’s] medical card to kick in. I had to spend \$750 a month” (Matt, customer). Both Matt and Marcie experienced medical problems that had left them in more debt than they could pay. “I owe him [physical therapist] about 70 bucks and I can’t afford to pay it so his billing company finally

turned me into a collection agency” (Matt). Matt and Marcie were in a tough position as they already had limited incomes, both being disabled and unemployed, but then they also had to manage paying off past medical debt.

Along with high out-of-pocket expenditures, there is a loss of wages during the time of injury or illness. Many of the interviewees were employed in low-skilled jobs that involved heavy use of their bodies. An injury could make a post-recovery return to work difficult at best. “I got injured on the job with [my employer]. A rear tailgate or uh, hatchback on a car come down and hit me on the head and damaged couple vertebrae in my neck... My neck’s always been stiff and sore since then.” (Max, customer). According to Lovell (2004), 47% of workers in the private sector do not receive any paid, sick time, which means when they have an illness or injury that requires them to skip work, it could result in them being fired. Some customers even spoke about mental health challenges and how difficult it can be getting help in rural places, beyond the stigma associated with mental health issues.

Mental health

Tens of millions of people in the U.S. face mental health issues, with only about half receiving treatment (NIMH, 2015). Mental health conditions, specifically depression, have been linked to food insecurity a (Kim & Frongillo, 2007; Leung, Epel, Willett, Rimm & Laraia, 2015). To address budget issues related to mental health facilities, Governor Branstad closed two of Iowa’s four mental health hospitals in 2015 (Office of the Governor, 2015). The loss of mental health facilities could exacerbate mental health problems in Iowa. Recent NIMH data shows that the greatest impact of any mental health condition—measured by disability-adjusted life years (DALYs) or years lost due to illness, mental health, etc.—is depression, which counts for 3.7% of DALYs lost in the U.S. each year (NIMH, 2015). The lack of mental health facilities could be

a barrier for people that become food insecure and develop depression to getting back on their feet and returning to work.

Three of the interviewees—Mike (anxiety and depression), Steve (anxiety), and Sylvia (bipolar disorder)—mentioned their struggle with mental health conditions, which forced them to lessen their work load or leave the work force entirely for a temporary time. Since they all live in rural areas (small and medium pantry customers), they would have to travel over 10 miles to get to the nearest mental health facility. Without treatment, Mike and Sylvia both acknowledged that they would be worse off than where they are today. Steve mentioned that with improved medication for his heart, his anxiety was reduced. Other interviewees likely had battled depression or another mental health condition at some point but did not address it directly. According to Dembe (2001), people suffering from work injuries that have been out of work for a year or more are more likely to self-report issues with anxiety and depression (2001).

Defining Disability

Based on the ADA definition of disability, medical issues as well as mental health should be considered disabilities since they limit “major life activities.” Such was the case of five interviewees who could not return to work. I also used the term “disability” to describe the conditions of the six interviewees who self-define as having a disability. However, the definition of disability by the ADA has created some room for legal interpretation and a certain subjectivity in the way the term disability is used in society. To “prove” disability for state protection, one must show a severe condition which cannot be improved with medication (Hensel, 2008). In addition, people with “mental retardation, diabetes, epilepsy, and cancer have all been deemed insufficiently impaired to be disabled within the meaning of the Act” (Hensel, p. 639, 2008). In other words, receiving protection under the ADA requires that one must first prove disability

under the law, which can be difficult due to its subjective definition.

The Social Security Administration offers two types of benefits for those with disabilities: Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI). The main difference between the two is that SSDI requires that the person has “paid into” the system, while SSI is for those that are not eligible for SSDI and is instead based on financial need (FindLaw, 2015). However, these programs are commonly referred to as just “disability.”

Steve, a customer from the small pantry, had difficulty proving his disability because of his young age, otherwise healthy appearance, and his scattered heart test results. Some days Steve said he would have “good days” at the doctor’s, which would leave room for interpretation as to whether his heart failure condition was truly a disability or not. “They threw out my doctor’s testimonies, like two doctors notes, my mom’s, my friends, my testimony. Because he looked at me and he’s like, ‘you’re healthy.’ So then I had to go appeal, and appeal it, and appeal it. And now I’m at the last council and I have all my doctors on board” (Steve, customer). Many people denied by the courts, which are made up of Social Security Administration (SSA) employees, appeal their denial. From 2000 to 2010, about 45% of disability claims were denied (SSA, 2011). However, 13% of the people that were originally denied were able to appeal the decision (SSA, 2011). This means people who are already struggling to make ends meet could go through years of trouble trying to qualify for disability; in Steve’s case, he first filed three years ago.

As noted in the focus group, some pantry volunteers were skeptical of customers on welfare and yet were able to frequent several food pantries. “On the other hand, when you say going to four pantries when you look at the time it takes, sometimes I think that is just, um, an occupation in itself” (Sue, volunteer). This perception is not unique to pantry volunteers. The

media often critiques SSI and SSDI (both welfare programs) for fostering unemployment amongst high school drop outs and the growth of the federal deficit by offering increased benefit levels and lax enrollment requirements (Roy, 2013). Roy (2013), in an article in *Forbes*, questions granting disability to those with such issues as back pain and mental illness and reports that the subjective nature of disability has led to skyrocketing enrollment levels (Roy, 2013).

Many critics do not recognize the living conditions of those living on disability because they are not counted as being unemployed (Joffe-Walt, 2013; Roy, 2013). Those qualifying for disability may make only about \$13,000 a year and are able to qualify for Medicare. Thus, “Going on disability means, assuming you rely only on those disability payments, you will be poor for the rest of your life. That's the deal. And it's a deal 14 million Americans have signed up for” (Joffe-Walt, 2013).

At a cost of over \$260 billion per year, the current disability program is an unsustainable approach to helping people with disabilities and who are in poverty (Joffe-Walt, 2013). SSDI is funded similarly to Social Security (through employers, workers, and self-employed) through the “Disability Insurance Trust Fund,” which is estimated to reach insolvency by 2027 (SSA, 2006). SSI, on the other hand, is funded through general federal taxes and is said to plateau in terms of beneficiaries, which makes it less concerning as compared to SSDI. (Joffe-Walt, 2013). However, the SSA has granted less people with benefits for either program over the years, noting that from 2000 to 2010 the percentage of beneficiaries dropped from 56.1% to 34.8% (SSA, 2011). During the same period, however, the total number of people filing for SSI and SSDI went from 1.36 million in 2000 to 2.84 million in 2010, which meant there was still an increase in overall enrollment (SSA, 2011).

With disability income and medical coverage often exceeding income from low wage jobs, only about 1% of beneficiaries of SSI or SSDI return to work (Joffe-Walt, 2013). This could also be due to the fact that a large portion of those currently receiving disability benefits are aging baby boomers, who can no longer work but need supplemental income. Before the SSDI trust fund reaches insolvency in 2027, Congress will need to take action “such as altering the benefit formula or eligibility rules, altering the share of payroll taxes devoted to the DI trust fund, raising overall payroll taxes, or undertaking more fundamental reform” (SSA, 2006).

Temporary Approach to a Chronic Problem

One of the main critiques of private food assistance is that while public assistance focuses on creating entitlements for the poor, private programs rely on a charity-based model which in essence “erode[s] the cultural foundations of public entitlements” (Poppendieck, p. 73, 1994). Additionally, private emergency food sources are rarely located in places of need, but rather in places where someone happens to start them, which is not how public services work (Poppendieck, 1999). This is especially relevant when looking at the GIS map of customers home locations versus pantry locations (See Figure 2), which shows that 28% of customers going to the large pantry travel ten or more miles to get there. Relying on charities is ultimately unstable because they are voluntary, meaning the people running them are not elected officials and have no requirement to answer to the people they serve (Lemann, 1997). However, the private emergency food pantries are key in providing more than \$2.2 billion meal equivalents per year in the U.S. (Ohls et al., 2002). In addition, many customers find that the private food system is a more humane and favorable approach to providing food assistance (Ohls et al., 2002). As noted in the literature, however, private assistance is often not a substitute for public assistance but rather a supplement (Paynter et al., 2008).

The pivotal role pantries play in the U.S. food safety net make them irreplaceable in many ways, evidenced by the 58% of SNAP recipients who are also frequent (every month) or recurrent (at least 6 months out of the year) users of Feeding America's food banks (Feeding America, 2014). However, little has been done at the local level to capture and record how food pantries are able to manage the volume of customers they get each month.

I chose the three pantries in this project because of their connection to a wider collaborative network through United Way of Story County. The survey data from each of the three pantries show that a majority (58%) of customers visit their respective pantries six or more times a year, and that 42% also go to more than one pantry to meet their food needs. So while an average of 58% of customer respondents were also receiving public food assistance, there was still a substantial unmet need for emergency food in these communities. In fact, it has been found that people enrolled in SNAP have experienced chronic hunger, further signifying the inadequacy of federal programs in meeting each household's food needs (Jensen, 2002). In fact, Paynter et al. (2008) models how recipients of SNAP are actually twice as likely to seek long-term private food assistance.

Given the baseline data provided by the surveys, it is clear that customers are seeking out multiple pantries and/or visit their local pantries frequently. However, the perception of *why* customers were going to multiple pantries sparked the conversation about "doubling up" among volunteers and how the United Way collaborative has worked to avoid issues of going to multiple pantries. But if people need more food than can be provided from one visit to one pantry, then why must they be critiqued for doing so?

The food insecure and impoverished in America have historically been blamed for their own situation instead of being understood as a victim or structural inequalities. The

individualization of people in poverty is related to a theory that puts the fault back on the person in poverty, claiming that the individual's misfortunes are the result of their irresponsibility (Bradshaw, 2007). Gilens (1999) claims that the reason why individualization and anti-welfare sentiment has proliferated in the U.S. is because of racial discrimination and the perception of benefits going to "undeserving" recipients. Additionally, Elmes and Derry (2013) conclude that instead of looking at systemic inequalities, society focuses on the poor and hungry as people who do not earn enough money through work, make poor choices regarding food choices at the grocery, or are "freeloading" off the government. Other studies have shown a correlation between volunteers' perceptions and those of the general stereotypes of the poor such as "freeloading" tendencies (Curtis, 1997; Edlefsen et al., 2002; Reingold et al., 2009).

Viewing food insecurity as the result of an individual's bad choices distracts from the true cause of poverty and food insecurity, which is systemic rather than individual. Food pantry customers avoid shame by distancing themselves from "other" individuals that "work the system." The result is cyclical, where the public perpetuates the individual responsibility, and the customers distance themselves from shame, reiterating the problem (Chase & Walker, 2013). There must be a reversal of the current shame tied to public assistance in the public discourse to support a collective social response that seeks to identify root causes rather than individual flaws leading to food insecurity. However, there are barriers that must first be overcome.

Just like the individualization of poverty and food insecurity, food pantries do not see themselves as part of a larger collective. Volunteers mentioned frequently that their participation in policy related work often felt unfruitful or like a waste of time. "We have people that go to the, uh, our congress people, both state and national. Um, we write. It feels like you're doing nothing but you know, we try" (Lindsey, volunteer). This is problematic as they are one of the

first responders for when the government cuts back on public assistance. In an article by Reingold et al. (2009), social service organizations' engagement in political activities was significantly related to organizations whose directors did not believe poverty could be explained by culture or attitudes/behavior of the poor.

The focus at the food pantries remains serving people emergency food. In a local newspaper article, "...Benker (employee at local food pantry) said area churches donate regularly, and they receive some monetary donations, 'but the need is just increasing'" (Ames Tribune, July 23, 2015). The common story in the local newspapers is about filling shelves with food for especially tough times, such as summer, and around the holidays. As the local need in Story County grows, the focus has been on filling immediate needs rather than solving long-term root causes of food insecurity. Therefore the conventional use of food pantries—to fill an immediate and seemingly temporary need—is perceived to be the answer. However, the question of how long pantries can sustain this conventional model has not really been considered. "I don't see us disappearing because there's always going to be someone. But whether or not you have people supplying it is the question" (Stacey, volunteer).

Instability of the three pantries

All three pantries in this study would be considered unstable in some ways, though some were more stable than others. When Paynter et al. (2011) researched pantries to determine organizational capacity and stability, they came up with several observations about structural weaknesses: limited or no professional staff, little management training amongst volunteers, no computerized records or computer skills, overly dependent on the support of an individual who is often a white elderly woman, outdated, poorly-equipped donated space, and dependence on religious institutions. These observations were reflected at least partially in all three pantries.

Two observations that I think are most relevant to the pantries in this study include lack of managerial training and no computerized records. Also, it is important to note that all of the volunteers in this research identify as white, and varied in ages from 40-65. Women play a huge role in the organizations, especially when it came to volunteering their time.

Lack of management training

Many of the volunteers touted the freedom of volunteering for the food pantry and the lack of oversight by committees or having to attend meetings. For Sue, part of her motivation is tied to the flexibility and informality of the pantry. “And I’ll be very honest I really don’t like working in a committee of 14 or 15 I can kind of do this when I’m there. I work on my own I can do what I wanna do and I can volunteer when I wanna volunteer.” (Sue, volunteer) Like other volunteers, she viewed training as bureaucratic and unhelpful to her work. “We look at things like the civil rights act and filling out forms as just very cumbersome you know and yet I know. So whenever you have the government involved you have more regulations. Same with dealing with the food bank” (Sue, volunteer).

Researchers and practitioners alike agree that training volunteers would lead to improved human resources within organizations (Frederickson, 2014; Paynter et al., 2011). In addition, training volunteers about other social service programs could be helpful as many times food pantries are the first place customers go, which puts pantry volunteers in a unique position to offer advice about other public assistance programs (Arriola, Baer, Daley, & Stuesse, 2015). However, as Poppendieck notes, “some [volunteers get] involved with food pantries in a conscious effort to help people stay off public assistance, and others prefer assistance in kind specifically because they have little faith that their clients will spend food stamps well and wisely” (p. 156, 1999). Among the three pantries, there appeared to be a lack of knowledge and a

lack of willingness to learn about public assistance resources on the part of the volunteers. This creates reluctance by the volunteers to provide this information to their customers. A study conducted with several non-profit directors about welfare programming confirmed that directors only wanted to become knowledgeable when it affected them in professional ways, such as changing their clientele or operations (Kissane, 2006).

Lack of computerization

All three pantries in this study still used paper to manage their accounts, which is common amongst many food pantries. This meant that at all three pantries volunteers would go through a collection of index cards documenting their customers to make sure that no one was being double-served. “[Someone] spends a lot of time going through the cards like cause she’s the one who files, like makes sure they did a USDA form and she’s the one that...see[s] same addresses or [says] ‘I just saw this name on another card’” (Laura, volunteer). However, though volunteers mentioned that paper records were most aggravating for reasons related to enforcing restrictions, paper is also inefficient in other ways. For example, computer monitoring would allow volunteers to better track unique customers as opposed to only the total number of customers. With the computer system, pantries could avoid multiple index cards for different members of the same family; for instance, if two members of the same household pick up food at different times, they could have two separate cards. Though this duplication can be avoided by looking at the index cards, it is more time consuming and not required by the Food Bank of Iowa. Since only total customer reports are required by the Food Bank, few pantries go to the trouble to report unique users. However, by tracking unique users, the pantries could obtain better longitudinal data related to how many of their customers use the pantry long-term, providing insight into changing food insecurity needs in each community over time. This

information is important as it could be used to create indicators of a community's well-being.

In a study examining Information Technology in pantries, the author noted that including database and internet technologies would be helpful for several reasons, including tracking client history information, food donation information, information regarding alternate sources of food assistance, and food assistance client education training (Gareau, 2004). Better data could also address the issues related to volunteer's understanding of other federal assistance programs.

CHAPTER 6. CONCLUSION

This research concludes that there is a chronic need for private emergency food among many food pantry customers in Story County, including those that are also on public assistance. Volunteer misconceptions about why customers utilize many private food sources creates a barrier for addressing this systemic issues of food insecurity and instead focuses on individual responsibility for their predicaments. From this study, it is clear that pantry volunteers and customers from the three pantries in Story County have a different understanding of how the private emergency food system should be used, and why they are being used the way they are.

The juxtaposition of volunteers and customer conversations from the same three pantries outlined what the gaps between how pantry volunteers perceive food insecurity and the lived experiences of pantry customers. One major finding includes the skepticism of rural pantry volunteers toward their customers' motivations for coming to the pantries. Using critical theory, it becomes evident that volunteers and customers have differing realities about the experiences of food insecurity, which has grave implications for these food pantries and how they are run. To add complexity, customers and volunteers tended to believe they had individual responsibility in their current situations. Rather than customers seeing themselves in a collective of people exhibiting social and economic inequality, they, like the volunteers, tended to focus on individual flaws. To create transformation, these unequal social arrangements must first be realized and then have actors (such as those in emergency food work) to change them. These arrangements may include the income, education, and healthcare gap, among other inequalities facing many people in poverty.

Additionally, another contribution this research makes is that since the pantries only count the total number of customers, it seems that demand has increased greatly from 2011-2014,

with the medium pantry experiencing a 40.7% increase and the small pantry experiencing a 34% increase. However, this increase may actually be due to customers visiting their pantry more frequently. From 2010 to 2015, there was a 57% increase in customers at the medium pantry coming six or more times a year, and a 27% increase at the small pantry. This signifies that food insecurity may not be effecting more people in the community, but rather is a chronic condition amongst the same people. This has implications for food pantries being categorized as “emergency” food sources.

The main findings from this project suggest that food insecurity is not a solitary issue amongst individuals, but rather just one of many basic necessities that cannot be met without the assistance of public or private organizations. The in-depth interviews helped to illustrate some of the conditions these individuals were facing, which included occupational injury (2), chronic illness (2), disability from car accident (1), or in one case, retirement. This created hardship within households due to the loss of income from being partially or completely out of the workforce.

Prevalent in the interviews was how individuals were making do with limited budgets, which in part came from the federal government’s public food assistance program. Part of this research sought to understand how changes happening at the policy level directly affected customers by forcing them to adapt. One adaptation was to seek out private food assistance organizations. Yet, going to food pantries to acquire enough food for the month is stigmatizing and often inadequate. Further stigmatizing the experience are pantry volunteers who are seeking to identify “abusers” of the system, i.e. those that use the pantries frequently. The relationship between volunteers and customers reveals a power difference, where customers are the ones

being served and the volunteers are the ones enforcing rules and performing a service in which only gratitude can repay.

There was a clear dichotomy in the understood purpose of the food pantries by the customers and the volunteers. Customers noted it helps stretch their food budget for the month and allowed them to put money into savings. However, volunteers focused on temporary, short-term needs such as going to the pantry after “gall bladder surgery.” Thus, the volunteers wanted to believe that their customers were mainly the working poor who temporarily had fallen on rough times. However, the interviewees signified much longer-term utilization of the pantries, noting that they began going to the pantry between three and fifteen years ago.

Medical problems among pantry customers were some of the most prevalent in terms of creating hardship within their household. Though medical insurance and health costs were mentioned by volunteers, they often focused on the short-term impact of health bills. However, the interviewees indicated much long impacts from healthcare costs. This leads customers to make choices, such as deciding between medicine and food, or gasoline and medicine. Still, volunteers responded that if someone has enough time to go to several pantries per week, that they should be able to have a job.

Throughout the focus group, the idea was expressed that some customers were more “deserving” than others, a stance that perpetuates the individualization of poverty and food insecurity. Certain comments illustrated that volunteers were not in tuned with what life as a food insecure individual. “Like we go to church on Sunday, we go to the food pantry on Wednesday at this town and on this day I think it’s just [habitual]” (Stacey, volunteer). Stacey’s comment is illustrative of the need for training and education with volunteers about poverty and food insecurity.

How effective are the pantries?

Although the conventional food pantry system is critiqued for not ending food insecurity, it does take a notable amount of time and effort just to acquire, distribute, and stock food at food pantries. Feeding America estimates that each year, volunteers give 100 million hours towards their agency and partner networks (Feeding America, 2014). Of the sixteen pantries in Story County, only two have full time staff and the rest are 100% volunteer run. Volunteer-run feeding programs around the U.S. are common, with Feeding America reporting that of their 58,000 partner feeding programs, 51% are run solely by volunteers (Feeding America, 2014).

The ability of these three pantries to meet their customer's food needs is best illustrated by looking at responses to two survey questions: percentage of customers coming to the pantry that are also on federal food assistance (44% at the large, 21% at the medium, and 61% at the small) and the percentage of customers going to more than one pantry (49% at the large, 57% at the medium, and 67% at the small). Though eliminating hunger may not be within these pantry's scope, these numbers certainly shed light on the issue of their customers are facing deep, long-term food insecurity.

Alternative to the anti-hunger approach

The alternative framework from the current charity-based, anti-hunger approach is known largely as the "food justice movement," which focuses on creating a more equitable food system. The food justice movement does "not just focus on *what* is eaten but *how* it is produced and distributed" (Levkoe, p. 89, 2006). The reason the alternative framework has been suggested is because using anti-hunger as a movement has proven unsuccessful in terms of mobilizing the greater community and involving diverse food system stakeholders (Pothukuchi & Kaufman, 1999).

Instead of focusing just on what local community action can do—such as the more progressive alternative community food security (CFS) movement—food justice operates at a broader regional scale in terms of changing food policy decisions. Additionally, food justice activism is different from CFS as it is more focused on grassroots organizing, and “has the ability to increase confidence, political efficacy, knowledge, and skills of those involved” (Levkoe, p. 90, 2006). It seems that CFS offers a great first start by focusing on the organizational capacity of the three pantries and what they can do, with the ultimate goal of food justice by empowering local community members in more of a bottom-up approach.

Table 6. Evidence-based strategies to build community food security. Source (McCullum, Desjardins, Kraak, Ladipo, & Costello, 2005).

Stage of continuum	Stage 1: Initial food systems change	Stage 2: Food systems in transition	Stage 3: Food systems redesign for sustainability ^a
Strategies and activities	<p>Counsel clients to maximize access to existing programs providing food and nutrition assistance, social services, and job training.</p> <p>Document the nutritional value of emergency foods.</p> <p>Identify food quality and price inequities in low-income neighborhoods.</p> <p>Educate consumers and institutions about the benefits of local, seasonal, and organic foods.</p>	<p>Connect emergency food programs with local urban agriculture projects.</p> <p>Create multi-sector partnerships and networks.</p> <p>Facilitate participatory decision-making and policy development through serving on food policy councils and organizing community-mapping processes and multistakeholder workshops.</p>	<p>Advocate for minimum wage increase and more affordable housing.</p> <p>Advocate for food labeling standards about product history (eg, place of origin, organic certified, Fair Trade certified^b).</p> <p>Through participatory decision-making and policy development, mobilize governments and communities to institutionalize:</p> <p>(1) land use policies that facilitate large-scale urban agriculture;</p> <p>(2) market promotion and subsidies as a way to increase a community's food self-reliance and achieve nutrition goals; and</p> <p>(3) tax incentives and financing mechanisms to attract local food businesses to low-income neighborhoods.</p>
Time frame	Short term	Medium term	Long term
Evaluation	Data collection, monitoring, and evaluation are conducted at all stages of the community food security continuum.		

Examples of non-conventional emergency food organizations

Using stage one of McCullum et al.'s (2005) approach to building community food security is helpful to operationalize the steps that should be taken to move towards more equitable conditions at these three food pantries. Specifically, I think the organizations themselves could benefit from capacity building before moving forward. The first step in stage one (Table 6) would be of particular interest: "Counsel clients [pantries] to maximize access to existing programs providing food and nutrition assistance, social services, and job training" (McCullum et al., p. 279, 2006). I would also add the need for building social capital amongst customers visiting the pantry in order to reverse the idea that food insecurity is an individual problem.

Before the pantries can suggest any further programs, there must be a space for relationship building at the pantries. Martin et al. suggests there is a great potential for transformation by training volunteers in practices such as motivational interviewing (2013); motivational interviewing is a counseling technique which employs "empathetic listening" in order to foster positive behavior change of clients (Rollnick & Miller, 1995). The action of listening could help both the customers and the volunteers, especially with developing a greater sense of empathy and understanding of the individual's personal hardships. This could potentially breakdown some of the stereotypes of food assistance and create unity around the issue of food insecurity as a systemic problem.

One food pantry in Central Iowa has a mission of serving people with dignity by not asking their customers' questions regarding their residence or income. This is seen as a more dignified approach in that people do not have to "prove" they are poor, and it also allows people to come as frequently as they need to meet their monthly food needs. This organization has also

been known for promoting social capital amongst customers, food justice by providing food from local sources that is of high quality, and reducing the barriers between customers and volunteers by building relationships with customers. However, this organization requires a multitude of volunteers, which is of special concern to the small pantry. On the other hand, more can be done to leverage volunteers from the smaller pantry, such as adopting the practice of the medium pantry which is to put volunteer information in a community-wide bulletin. It is important to pull volunteers from a variety of sources to ensure diversity and inclusiveness.

More can be done at the pantry-level by bringing in specialists from local social services to create either a display on nutrition or do a food demonstration for customers while they wait. Some organizations in Central Iowa have already invited a nutrition educator from Iowa State Extension to do cooking demonstrations and talk about nutrition at their organizations. This option is available to other pantries that allow for it. Other resources such as job training and education programming could be promoted with new displays or in person. Current displays at the three pantries are not well tended to and often feature out-of-date information. At the same time, customers are not drawn to look at the information for a variety of reasons which may need to first be explored.

Lastly, there could be more emphasis on conducting customer evaluations, either by United Way or the pantries themselves. A supportive network known as “WhyHunger,” which is an organization that supports food justice in emergency food programs, offers a few ideas for how to do evaluations. One of the evaluative measures they recommend is an outcome-based evaluation, which seeks to assess their services (emergency food) in light of their customers’ total needs. This evaluation would also require that the pantries craft succinct mission statements, which may create changes in their operations. For example, if their mission is to

eliminate hunger, then they may need to change their restrictions to actually do this in their communities locally.

Limitations

One of the main limitations to this research was the timing. Since the research was to be completed within a short time frame, only customers coming to the three pantries during the months of May, June, and early July were included. Since those months span the time in which children were let out of school and summer work picks up, I could have unintentionally excluded certain people, such as summer laborers and parents and children. In addition, Mosley and Tiehen (2004) report that over a three year period, results show that food pantries have the highest rates of customers also on public assistance during the months of November and December, which is likely due to the holidays. Using the results of Mosley and Tiehen, it could be assumed that by surveying in the summertime, there could be fewer individuals that are also on food assistance visiting the pantries, which could have affected the survey results and demographics of chosen interviewees.

Another limitation could have been that some customers taking the survey could have been ashamed and therefore untruthful; if a customer who completed a survey said they did not receive public assistance when they did, this would mean I could have potentially had different in-depth interviewees.

Additionally, this research could have been drastically different had I invited different food pantries to the focus group. The resulting disconnect found between most volunteers and customers is not generalizable to all rural pantries. Instead, this research is a way for many working in the anti-hunger movement to question their assumptions and actions. This reflective

capacity will be key in moving from emergency food towards a more just and equitable society which questions inequalities instead of looking towards personal misfortunes.

Implications

The aim of this research was to catch the attention of two local organizations: United Way of Story County food pantry collaboration and the Food Bank of Iowa. Though this research was not meant to be generalizable, it hopefully opens the door for more reflective thinking locally at Iowa's—and the nations—emergency food pantry and soup kitchen organizations. However, the idea of counting unique users by moving towards computer-based tracking may be something that can be generalizable. If accomplished in a dignified way, this can be a tactic used by food pantry volunteers to better customize their approach towards particular customers requiring certain resources to help them move away from long-term food insecurity.

Additionally, the potential for a support system which mobilizes multiple food system organizations could be of interest towards enacting real change at the pantry level. These three pantries were under the support of United Way and the Food Bank of Iowa (an agency of Feeding America), which are both powerful organizations in the state that have the potential to make progress in the political arena around food justice. With the food pantries acting as on-the-ground organizations interacting with food insecure customers, they are best suited to listen and help bridge the gap in communication between policy makers and the food insecure.

This research also reflects back on the role of the United Way food pantry collaboration. The purpose of the food pantry collaboration meetings is to disseminate programs that are happening around the county, such as the backpack program, food drives, summer feeding programs, etc. Additionally, it gives the pantry volunteers time to talk with one another about

what is happening at their pantry, especially in terms of high and low demand times. The food pantry collaboration has been esteemed as one of the best organizations, albeit the only, in the state that is bringing together most all of the county's food pantries. Given the results of this research, there is a call to action for this organization to offer more volunteer training and education to better understand the root causes of hunger and poverty in their community. One suggested approach I have towards creating more cohesion between the volunteers and customers could be to ask customers from the pantries to come to United Way's meetings as a member. This could bridge the gap and offer a bottom-up approach towards initiating more social capital building between customers and between customers and volunteers.

Recommendations

A list of recommendations have been included to overcome some of the aforementioned challenges and opportunities facing food pantries in the state and around the country. These recommendations are made in light of the fact that food pantries are such a critical piece in the food safety net and that often they are the first place that customers turn to when they need food. In these recommendations, I have included three goals for the short, medium, and long-term in each of the three phases. First, I believe food banks and food pantries are in dire need to reverse current thinking and stereotyping of the poor by their own workers/volunteers, and to also work to change the minds of the general public. Second, to further reduce the gap of understanding between customers and volunteers long-term, community building at the pantries will be used to help volunteers have empathy and fully understand the issues facing their customers. Third, the measure of success at the food pantries needs to shift from a charity-based approach, to a food justice approach; this involves placing pressure on corporations and businesses offering too low of income and medical benefits, two known contributors to putting people in poverty. Rather than

focusing on how many pounds of food are donated, the focus should also switch towards how many unique individuals they were able to assist out of poverty.

Table 7. Recommendations to emergency food providers

Phase I			
Action:	Feeding America	Food Bank of Iowa	United Way of Story County
Reverse the assumptions that poverty and food insecurity are a result of a customer's personal choices and deficiencies	Long term: Media campaigns to change the negative view of the general public around SNAP and other public assistance; lobbying to protect public food assistance, minimum wage raise, and access to nutritious food stores in all neighborhoods (including the number of stores accepting SNAP); promote the idea that Feeding America is contingent upon public support and should not be considered a substitute.	Long term: Craft media messages to portray the chronic needs of Iowans facing poverty and food insecurity instead of encouraging temporary donations; rather than focusing purely on food drives, focus on collective action to address root causes such as the income gap, education gap, and healthcare gap.	Long term: Support local conferences (recommend Food Bank of Iowa as host), which should include food pantry customers, to understand how to combat poverty; create indicators based on unique customers going to pantries for several years and provide support to communities with the highest prevalence of chronic food pantry use to do a community food assessment (See "City Harvest" website).
	Medium term: Training for all 200 food bank representatives that then can be disseminated to food pantries about the importance of avoiding stereotypes about customers; promote the "Closing the Hunger Gap" conference and offer support for scholarships; collaborate with universities and colleges to do case study work in the emergency food system.	Medium term: Share stories of pantries within the state doing food pantry work that focuses on human dignity and empowerment of customers; create a local conference for food pantry staff and invite customers (offer funding to do so) to share stories and address problems; offer incentives to corporate donors that donate fresher, healthier options.	Medium term: Hire or recruit a passionate volunteer to act as an ambassador to all pantries in the county to act as an unbiased liaison that offers assistance to food pantry customers and volunteers and reports back to understand what is happening at each pantry; promote training to all pantry staff/volunteers about other public assistance programming and encourage sign-ups at each pantry.
	Short term: Create videos for food pantry/food bank staff to describe the themes found in this research (i.e. othering and its affects, and general stereotyping about the poor); require annual self-evaluations from each pantry related to effectiveness and transformational capacity.	Short term: Require pantries to report unique customer numbers (as opposed to total) over time; offer grants for computers at pantries for staff and customers to use to find out about resources during pantry hours of operation.	Short term: Research to decide how to promote better communication between the customers and volunteers; request that the recruitment of volunteers for the food pantries include a diversity of source, including the customers themselves.

Table 8. Phase II of recommendations to emergency food providers

Phase II			
Action:	Feeding America	Food Bank of Iowa	United Way of Story County
Build trust between customers and staff, and address root cause of food insecurity	Long-term: Offer incentives, such as grant dollars, for food banks that are doing more than just offering emergency food (like partnering with other agencies to offer free classes or open computer access to customers).	Long-term: Offer space at the food bank or other location for multiple services to be located in one place, such as a clothing and food pantry, medical and dental examination location, nutrition and public programming education, money management classes, etc.	Long-term: Move beyond emergency food to food justice, including acknowledging local inequalities in communities and placing pressure for fair wages, equal access to affordable food and healthcare, and equitable access to quality schools.
	Medium-term: Partnering with universities to create curriculum for food pantries to employ related to different topics each month to build community.	Medium-term: Move towards having food bank employees spend a percentage of their time coordinating with other social service organizations and food pantries.	Medium-term: Bring in other social service organizations to talk to the customers during the hours of operation; create an ambassador program for customers (current and previous) that want to help offer support to other customers.
	Short-term: Provide funding in the way of renovating space at pantries to encourage more customer and volunteer conversation and create a more comfortable environment; incentivize food banks to partner with local colleges to create a project that tells the story of willing food pantry customers.	Short-term: Work with other counties to try to set up organizations similar to the United Way of Story County food pantry collaboration to disseminate information and offer best management practices; offer monetary or informational support (data) to pantries or organizations addressing systemic problems in society (i.e. communities hosting meetings on minimum wage, healthcare access, etc.).	Short-term: Mandate that a portion of the food pantry and hunger collaboration meetings also consist of customers to offer inclusive and effective ideas; create materials and displays to put in all 16 pantries that offer updated information.

Table 9. Phase III of recommendations to emergency food providers

Phase III			
Action:	Feeding America	Food Bank of Iowa	United Way of Story County
Measures of success altered	Long-term: Transition from focusing on pounds of food distributed; focus on reducing inequalities in society by doing research at food banks and pantries (why are people in poverty, what are the commonalities that can be addressed, addressing the discrepancy of poverty in terms of race/ethnicity, gender, age, etc.)	Long-term: Goal should be to reduce the time a unique customer has to go to a pantry in the most dignified and effective way.	Long-term: Maximize the amount of services a person coming to the pantry can receive to encourage them to become self-sufficient and reduce the harmful sociological and physical effects of food insecurity; encourage customers to set and meet goals through customer-led collaborations and support groups.
	Medium-term: Transition media focus from how much food gleaned to focus on educating the public of what it means to be food insecure.	Medium-term: Host a session at the Iowa Hunger Summit to talk about ways to debunk myths in society around public assistance; handout information cards to pantry staff to give out at the pantries and community members.	Medium-term: Create an indicator based on the number of food pantries reducing unique users over time and highlight what paths they used to succeed/fail.
	Short-term: Focusing on reporting how much food donated met a quality food standard for nutritious diets; add a report on how many food banks are reducing long-term users of food pantries and what practices they are using to do so.	Short-term: Promote and report numbers of food bank/pantry customers that have also been signed up for public assistance as a way to promote several services.	Short-term: Have the food pantries report numbers on unique customers (also to be required by Food Bank of Iowa).

Future Research

During the course of this research, I had several ideas for future research. One idea is to focus on capturing the voices of those that did not qualify for food assistance and therefore were forced to seek out help from food pantries. This would allow for a researcher to critique the poverty line in relation to qualifying for public food assistance. Additionally, research to understand whether food pantries are even considered acceptable ways of attaining food is an important research topic that could change the discussion on public/private food assistance. In

addition, all of the recommendations to Feeding America, Food Bank of Iowa, and United Way of Story County offer areas of needed research and contribution by universities and colleges, and in turn, could allow students to better understand the dynamics of poverty.

Moreover, research is needed to capture the voices of non-native English speakers using the pantry. From my experiences at the urban pantry, I could see that the Spanish-speaking population was forced to figure out a lot of things on their own given the lack of fluent Spanish speaking volunteers. The pantry may be conceptualized and experienced differently from their point of view, which could offer further recommendations to pantries with Spanish-speaking populations.

This research could have also been expanded to include more voices from the Food Bank of Iowa and United Way of Story County. It may be that since they are employed and thus trained in this area, their ideas and perceptions would greatly differ from those of the pantry volunteers. Also, more than one focus group could have been held, including more pantry volunteers from just rural or just urban pantries to identify whether there really is a divide between urban and rural pantry volunteers' perspectives.

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APPENDIX A. INSTITUTIONAL REVIEW BOARD APPROVAL

IOWA STATE UNIVERSITY
OF SCIENCE AND TECHNOLOGY

Institutional Review Board
Office for Responsible Research
Vice President for Research
1138 Pearson Hall
Ames, Iowa 50011-1207
515 284-4598
FAX 515 281-1207

Date: 6/4/2015

To: Jacqueline Nester
705 Clark Avenue #7

CC: Dr. Carlton Baernsjan
128 Design

From: Office for Responsible Research

Title: Case Study of Food Pantries in Story County, Iowa: A look at scale

IRB ID: 15-213

Approval Date: 6/3/2015

Date for Continuing Review: 5/18/2017

Submission Type: New

Review Type: Full Committee

The project referenced above has received approval from the Institutional Review Board (IRB) at Iowa State University according to the dates shown above. Please refer to the IRB ID number shown above in all correspondence regarding this study.

To ensure compliance with federal regulations (45 CFR 46 & 21 CFR 56), please be sure to:

- **Use only the approved study materials in your research, including the recruitment materials and informed consent documents that have the IRB approval stamp.**
- **Retain signed informed consent documents for 3 years after the close of the study, when documented consent is required.**
- **Obtain IRB approval prior to implementing any changes to the study by submitting a Modification Form for Non-Exempt Research or Amendment for Personnel Changes form, as necessary.**
- **Immediately inform the IRB of (1) all serious and/or unexpected adverse experiences involving risks to subjects or others; and (2) any other unanticipated problems involving risks to subjects or others.**
- **Stop all research activity if IRB approval lapses, unless continuation is necessary to prevent harm to research participants. Research activity can resume once IRB approval is reestablished.**
- **Complete a new continuing review form at least three to four weeks prior to the date for continuing review as noted above to provide sufficient time for the IRB to review and approve continuation of the study. We will send a courtesy reminder as this date approaches.**

Please be aware that IRB approval means that you have met the requirements of federal regulations and ISU policies governing human subjects research. Approval from other entities may also be needed. For example, access to data from private records (e.g. student, medical, or employment records, etc.) that are protected by FERPA, HIPAA, or other confidentiality policies requires permission from the holders of those records. Similarly, for research conducted in institutions other than ISU (e.g., schools, other colleges or universities, medical facilities, companies, etc.), investigators must obtain permission from the institution(s) as required by their policies. IRB approval in no way implies or guarantees that permission from these other entities will be granted.

Upon completion of the project, please submit a Project Closure Form to the Office for Responsible Research, 1138 Pearson Hall to officially close the project.

Please don't hesitate to contact us if you have questions or concerns at 515-284-4598 or IRB@iastate.edu.

IRB Full Committee Approval Received on 6/3/2015

APPENDIX B. CUSTOMER SURVEY

1. How many times in the past 12 months have you visited this food pantry?
☐ First time in 12 months ☐ 2-3 times ☐ 4-5 times ☐ 6 or more times
2. Do you visit more than one food pantry a month? **(If YES, please name them)**
☐ Yes _____ ☐ No
3. How did you first hear about this food pantry?

4. If there were **no restrictions on how many times per month** you could visit this food pantry, how many times would you need to come?
☐ Once is enough ☐ 2 times ☐ 3-4 times ☐ 5 or more times
5. Do you or anyone in your household receive benefits from a governmental food assistance program(s)? (Food Stamps [SNAP], WIC, School Breakfast and/or lunch Program)
☐ Yes (*SKIP #7*) ☐ No (*SKIP #6*)
6. **If yes, which program? (Check all that apply)**
☐ Food Stamps ☐ WIC ☐ School Breakfast Program ☐ National School Lunch Program
☐ Other _____
7. **If no, why not?** _____
8. What is your age? ☐ 18-25 ☐ 26-30 ☐ 31-40 ☐ 41-50 ☐ 51-64
☐ 65+
9. What is your gender? ☐ Male ☐ Female ☐ Rather not say
10. Which of these best describes your race/ethnicity?
☐ Caucasian/White ☐ African American/Black ☐ Asian ☐ Native American
☐ Hispanic/Latino ☐ Other _____
11. **Please circle all that applies**

How many small children (0-4) live in your household full time?	1	2	3	4	4+	NONE
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How many school children (5-18) live in your household full time?	1	2	3	4	4+	NONE
How many adults (18-64) live in your household full time (NOT including yourself)	1	2	3	4	4+	NONE
How many seniors (65+) live in your household full time (NOT including yourself)	1	2	3	4	4+	NONE

12. How many people that live in your household regularly work for pay (**Including yourself**)?

☐ None ☐ 1 ☐ 2 ☐ 3 ☐ 4 or more

13. How long does the food you receive from this food pantry last you?

☐ 1 day ☐ 2-3 days ☐ 4-5 days ☐ About 1 week ☐ More than a week

14. Which of the following would make it more convenient for you to visit this pantry?
(**CHECK ALL THAT APPLY**)

☐ More evening hours ☐ More weekday hours ☐ Weekend hours
☐ location accessible by public transit ☐ handicapped-accessible location
☐ None ☐ Other (Specify) _____

15. Your main method of transportation is:

☐ Car (that you own) ☐ Ride from family/friends ☐ Bus ☐ Taxi ☐ Walk
☐ Other _____

16. If selected, would you be interested in being contacted for an interview in which you would **receive a \$10 healthy food voucher for 60-90 minutes** of your time ☐ Yes
☐ No

16a. **IF YES**, what would be the best way to contact you? ☐

Email _____ ☐ At this pantry during a distribution ☐

Phone _____ ☐ Other _____

16b. **IF YES**, When are you mostly available? ☐ Weekdays AM ☐

Weekdays PM ☐ Weekends AM ☐ Weekends PM

PLEASE FILL OUT THIS INFORMATION TO BE ELIGIBLE FOR ENTRY INTO THE DRAWING TO RECEIVE A HEALTHY FOOD VOUCHER:

NAME, CONTACT INFO, AND ADDRESS

APPENDIX C. CUSTOMER INTERVIEW GUIDE

1. Can you provide me with a little bit of background for yourself (how did you get to where you are, how were you raised)

Topics I hope to get from the history: Employment history, education, moving from state-to-state, family history, any calamities, age

2. Walk me through a typical day in your life. Imagine that you are hungry and need to go get food. Where do you go, how do you get there?
 - a. How much time do you have to put a meal together?
 - b. Do you ever run out of food?
3. How often do you come to X food pantry?
 - a. When was the first time you came?
 - b. Do you visit more than one pantry a month? If yes, could you tell me a little bit about why you go to more than one, and which one you prefer, if any?
 - c. How do you spend the money you otherwise would have spent on food?
4. What sources of food assistance do you have? (SNAP/WIC, family, other food pantries)
 - a. If you have been on SNAP, has the decrease in allotment changed anything for you?
 - b. Can you talk about the impact the last 5-10 years has had (in relation to the Great Recession?)
5. How do you feel about having to get food assistance?
 - a. [You talked about your first time coming here...] What do you feel could help you NO LONGER need food assistance?
 - b. If you could suggest any program/service be offered to help you (and others) become food secure, what would those look like? (i.e. education class on finance, cooking, etc.)
6. What is the best part about this pantry?
 - a. Do you know others that come here on a regular basis?
7. What is the worst part about this pantry?

APPENDIX D. FOCUS GROUP GUIDE

1. Imagine that it is my first time coming to your pantry. What would I need to do/bring in order to get food assistance? (Please say your pantry before you speak)
 - a. How often could I come?
 - b. How do most people hear about your pantry would you say?
2. Would you say your pantry stressed economically?
 - a. What decisions do you make for your pantry specifically? (i.e. order food, apply for grants, coordinate with others for donations)
3. Have you seen a recent increase in those seeking food assistance? If so, why do you think that is?
 - a. Are you seeing a change in demographics (more seniors, for example?, younger people, depending on the community)
 - b. Has the recent cut in SNAP benefits influenced how much you give or the amount of people coming?
 - c. What proportion would you say is coming to your pantry that is also on federal assistance?
 - d. How many do you think are visiting other food pantries within one month? What comments do you have about that?
4. Where do you get your volunteers? Would you say volunteers are difficult to obtain?
5. Why do you do this work—what's your passion?
6. What (if anything) would you change about your food pantry to make it better for the users?
7. Can you think of ways to better achieve long-term food security in your community?
 - a. Can you identify barriers to food security in Story County?
 - b. If you had twice the resources and volunteers, what, if anything, would you do differently at your pantry?